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FUNCTIONAL
DERANGEMENTS.

COURTENAY.



ON
S P E R M A T O R R H Œ A
AND
CERTAIN FUNCTIONAL DERANGEMENTS
AND
D E B I L I T I E S
OF THE
GENERATIVE SYSTEM :

THEIR NATURE, TREATMENT, AND CURE.

By F. B. COURTENAY,

MEMBER OF THE ROYAL COLLEGE OF SURGEONS OF ENGLAND, AND FORMERLY
SURGEON TO THE METROPOLITAN INFIRMARY FOR THE CURE OF
STRICTURE OF THE URETHRA.

Twelfth Edition.



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P R E F A C E
TO THE TWELFTH EDITION.

FIFTY-SIX years have elapsed since I commenced my professional career by being apprenticed (as the fashion then was) to Messrs. Banks and Jones, of Ryde, Isle of Wight, practising as Surgeon-Apothecaries—the phrase used in those days to designate medical general practitioners. Subsequently, I resided as assistant with the late Mr. Welch, at Stanstead, in Essex. From thence I went to reside with Mr. Nedham, of Belgrave Gate, Leicester who was a gentleman of great eminence in the profession, and who held the appointments of Senior Surgeon to the Leicester County Infirmary, Fever House, Lunatic Asylum, the County and Town Gaols, and was, at the same time, surgeon to several charities existing in that town. On leaving Leicester, and after spending some time as a student at Guy's, I went to reside with the late Mr. Stevens at Pewsey, Wilts. All of these

gentlemen had large practices. At the first and the last places I had unusual opportunities of studying my profession in purely agricultural districts. Whilst at Leicester I had the inestimable advantage of acquiring a knowledge of it not only among all classes of the usual residents of a manufacturing town, but also amongst county families.

Looking back now to those days, I feel that I owe all the success I have since met with in my professional life to the fund of general and practical medical and surgical knowledge I then acquired. It is true that, at an early period of my career as a consulting surgeon, I adopted and devoted myself to the study and treatment of a special class of diseases—namely, those incidental to the Genito-Urinary Organs. But I did not do so without having a competent guide, philosopher and friend in my late father, who, for a period of forty antecedent years, had a large special practice in this class of maladies. I think, then, that I may claim to hold, in the narrow compass of my own brain, a combined experience of eighty-nine years in the treatment of the maladies which have

formed the subject of my speciality. Notwithstanding the advantages derived from my late father's tuition, without having acquired the large amount of general experience I did whilst resident with the gentlemen I have referred to, I should, doubtless, have been much less fit to enter upon the career I subsequently followed.

I have been in some degree led into making these observations by the discussion of the subject of Specialism which has recently appeared in the *Lancet* consequent on some remarks made by a well-known physician, and which have formed the subject of a *pro.* and *con.* correspondence in that journal by others. I trust I may not be thought presumptuous, considering my position, experience, and age, in expressing my firm conviction that specialism, when practised by men who have fully qualified themselves by study and experience to practice in all the various branches of medicine, is an unmixed good both to the profession and the public. At all events, I am sure that this is the general feeling. For example, one of the most common questions I have asked me by patients and friends

is : "Who is a good man to go to for the Heart, the Liver, Lungs, Gout?" and so on, as the case may be. And I therefore trust that those who are honestly impelled to devote themselves to the special study and treatment of any one, or any class of diseases, will not be deterred from doing so by a senseless and prejudiced outcry, always bearing in mind that they should, in their conduct towards their patients, practice the same candour and kind consideration which, for the most part, so honourably distinguish all classes of the noble profession of which I am a humble member.

F. B. COURTENAY. ,

2 CHANDOS STREET, CAVENDISH SQUARE,
January, 1882.

P R E F A C E
TO THE ELEVENTH EDITION.

It is exactly twenty-one years since the First Edition of this *brochure* was published. At that time, after twenty years' experience, I ventured to assert that the various subjects on which it treats had, under the combined influence of professional fallacies, popular delusions, and the vilest quackery, become one of the social evils of the day, and that it was time some attempt should be made to stem the torrent of unnecessary alarm, causeless mental suffering, and extortion, to which both the real and imaginary sufferers under certain diseases of the generative system were daily exposed. With this object in view, I endeavoured to present such a common sense and plain account of the nature, consequences, and treatment of the class of maladies referred to, as would be at once intelligible and consoling to

those who might in reality or imagination be suffering under any one of them, rather than to write an elaborate treatise, filled with medical descriptions and technicalities which would in all probability have been unintelligible to the general reader, and consequently of no use to those for whose special guidance and protection it was written.

It is not within my province to give any opinion as to the amount of success with which I have carried out my task. But the numerous editions through which my little work has passed, and the thousands on thousands of copies which have been sold, at all events attest the wide-spread interest taken in its subject; whilst, if I may venture to judge from the numerous letters addressed to me from all parts of the world by sufferers under some one of the various maladies treated of, I have not been altogether unsuccessful in my object. In many of these letters, strangers, after thanking me for its publication, have told me that the mere perusal of the book has at once cured them of a host of fancied maladies under which, from

having read other medical and some quack works, they imagined themselves to be labouring; whilst, even in the cases of real sufferers, I have received letters of thanks, saying that the freedom from exaggeration, and the plain common-sense tone of my remarks, had relieved them from a great amount of mental anxiety in relation to the nature and consequences of their different maladies. With such flattering testimonials, I confidently present this edition to the profession and the public, in the hope that it will at least attain the same amount of success as the previous editions, and be equally beneficial to those who may consult it.

F. B. COURTENAY.

2 CHANDOS STREET, CAVENDISH SQUARE.

April 22nd, 1878.

POSTSCRIPT.

SINCE the publication of this work and my "Revelations of Quacks and Quackery," I have been, and am constantly, applied to by the victims of quacks and improper treatment, for advice as to the best means of obtaining redress.

Now after forty-nine years' active practice, my correspondence with patients and personal professional engagements are so numerous as to render it physically impossible for me to answer any letters, except those addressed to me by my patients. I trust this announcement will be accepted as a sufficient apology—if one be needed—for such communications remaining unanswered in future.

F. B. C.

ON
SPERMATORRHŒA
AND
DISEASES OF THE GENERATIVE SYSTEM.

OF all the diseases to which man is liable, there are none which cause more intense mental anxiety to the sufferer, or more embitter his social relations and happiness, than those which affect his generative system or copulative powers. At the same time, prevalent and important as these disorders are, I know of no maladies to which "flesh is heir," the nature, consequences, and treatment of which are so surrounded and entangled with professional fallacies and popular delusions, as well as by the grossest and vilest impostures of quackery.

Dr. Pickford, in his truly valuable work on True and False Spermatorrhœa,* justly remarks:—"Of all

* "On True and False Spermatorrhœa, with a view to the correction of wide spread errors." Translated from the German of Dr. Pickford. Published by Baillière, Tindall, and Cox, 20 King William Street, Strand, London. The Seventh Edition, price 5s ; by post free, 5s. 4d.

“forms of Hypochondriasis, there is none which presents a worse character, and none which more embitters human life, than that which takes the sexual relations for the object of its gloomy fancies.”

“Terrified in all sorts of ways by philanthropists—often ill-advised by physicians—and preyed upon in the most shameless manner by quacks—patients suffering from this terrible calamity are, in fact, deserving of the greatest sympathy ; and it is really time that some explanation of their misfortunes, accompanied by consolation, should be afforded by the medical profession.”

These remarks, although made in reference to the position of patients in Germany, are equally applicable to that of patients in this country. Indeed, it would be impossible to give a more accurate description of the position of this class of patients amongst ourselves.]

It is now upwards of forty-nine years since I was first led to turn my especial attention to the study and treatment of the diseases of the genito-urinary organs. At the commencement of that period, and perhaps for twelve or fourteen years after, some of the most important of the maladies to which the generative system is liable—such as the various forms of generative and copulative debility to which I shall have occasion hereafter to refer—were almost universally considered by the profession as *imagi-*

nary disorders, solely emanating from the diseased minds of half-crazed patients ; whilst Spermatorrhœa, of which we now hear so much, was an unthought-of disease.

The publication of Dr. Lallemand's work, "*Des Pertes Seminales*," in France, and its subsequent translation and publication in this country by the late Dr. M'Dougall, at once established the fact that these disorders were not so purely ideal or so unimportant as had previously been very generally supposed ; and hence many members of the profession, who had ignored the existence of this class of *maladies*, were led to investigate the subject, and, as a necessary consequence, to admit the reality of such complaints. Indeed, even those who have not thought it worth their while to devote any especial attention to the subject have been compelled to acknowledge that such diseases do exist. Hence it is now generally admitted that *maladies* of this class are more or less real. But, notwithstanding this unanimity, if we inquire further, and enter on the question of the frequency, importance, consequence, and treatment of these diseases (especially that of Spermatorrhœa), we shall meet with a great diversity of opinion. The professional disagreements and fallacies are very numerous on these questions. Some affect to consider these complaints as exceedingly rare and of trifling import, whilst according to others they are very pre-

valent, of the greatest importance, and their consequences most disastrous. Then again we find others entertaining opinions of every shade between these two extremes.

I would, before entering on the consideration of this diversity of opinion in a merely medical point of view, offer some remarks on the general aspect which these different views present, their influence on the conduct of some members of the profession, and the consequences hence entailed on the real or imaginary sufferers who seek their aid.

Some members of the profession, and very eminent members too, without venturing to deny the reality of this class of maladies, when consulted by patients who in reality or imagination are labouring under them, act as if they either deemed them ideal and of no importance, or else thought it beneath their dignity to undertake the treatment of such disorders. Now, to such I say, it is a fallacy to deny the reality of these diseases—a fallacy to treat them as of no importance—and a still greater fallacy to think their treatment beneath the dignity of the most exalted in the profession. To take the first of these objections: Even admitting that there is no reality in these diseases, that they exist only in the disordered imagination of the patient, it would still be a cruel error to treat the imaginary sufferer as one beneath consideration, inasmuch as it is equally within the scope

of our duties to pay attention to mental irregularities as to physical disorders. An imaginary sufferer under any malady is as much entitled to our attention and sympathy as he who is actually labouring under any real affection.

It was justly remarked by the late Dr. John Gregory, in his Lectures on the duties and qualifications of a physician, in referring to the treatment of that class of patients commonly denominated *Nervous*, that:—"Although the fears of these patients "are generally groundless, yet their sufferings are "real; and the disease is as much seated in their "constitution as a rheumatism or a dropsy. To "treat their complaints with ridicule or neglect, "from supposing them the result of a crazy imagination, is equally cruel and absurd; they generally "arise from, or are attended with, bodily disorders "obvious enough; but, supposing them otherwise "still it is the physician's duty to do everything in "his power for the relief of the distressed. Disorders "of the imagination may be as properly the object "of a physician's attention as those of the body; "and surely they are frequently of all distresses the "greatest, and demand the most tender sympathy." An eloquent writer on Nervous Diseases * also truly remarks:—"He who in the study or the treatment

* Reid "On Hypochondriasis."

“ of the human machinery overlooks the intellectual
“ part of it, cannot entertain very correct notions of
“ its nature, and falls into gross and sometimes fatal
“ blunders in the means which he adopts for its
“ regulation or repair. Whilst he is directing his
“ purblind skill to remove or relieve some more ob-
“ vious and superficial symptom, the worm of mental
“ malady may be gnawing inwardly and undetected
“ at the root of the constitution. He may be in a
“ situation, like that of a surgeon, who, at the time
“ that he is occupied in tying up one artery, is not
“ aware that his patient is bleeding to death at
“ another. Intellect is not omnipotent; but its ac-
“ tual power over the organised matter to which it is
“ attached is much greater than is usually imagined.”
Again, the same author remarks :—“ Nervous dis-
“ eases, from their daily increasing prevalence, deserve
“ at the present time a more than ordinary degree of
“ interest and attention on the part of the medical
“ practitioner. Yet nothing scarcely can surpass the
“ inhumanity, as well as the folly, with which
“ patients of this class are too frequently treated.
“ We often act upon the ill-founded idea that such
“ complaints are altogether dependent upon the
“ power of the will; a notion which, in paradoxical
“ extravagance, scarcely yields to the doctrine of a
“ modern, though already obsolete writer, on ‘The
“ Philosophy of Morals,’ who asserted that no one

“ need die, if with a sufficient energy he determined to
“ live. To command or to advise a person labouring
“ under nervous depression to be cheerful and alert,
“ is no less idle and absurd than it would be to com-
“ mand and advise a person, under the direct in-
“ fluence of the sun’s rays, to shiver with cold, or one
“ who is ‘ wallowing naked in December’s snows ’ to
“ perspire from a sensation of excessive heat. The
“ practice of laughing at or scolding a patient of this
“ class is equally cruel and ineffectual. No one was
“ ever laughed or scolded out of hypochondriasis. It
“ is scarcely likely that we should elevate a person’s
“ spirits by insulting his understanding. The malady
“ of the nerves is in general of too obstinate a nature
“ to yield to a sarcasm or a sneer. It would scarcely be
“ more preposterous to think of dissipating a dropsy of
“ the chest than a distemper of the mind by the force
“ of ridicule or rebuke. The hypochondriac may feel,
“ indeed, the edge of the satire as keenly as he would
“ that of a sword ; but, although its point should
“ penetrate his bosom, it would not be likely to let
“ out from it any portion of that noxious matter by
“ which it is so painfully oppressed. The external
“ expression of his disorder may be checked by the
“ coercive influence of shame or fear ; but, in doing
“ this, a similar kind of risk is incurred to what
“ arises from the repelling of a cutaneous eruption,
“ which, although it conceals the outward appear-

“ance, seldom fails still more firmly to establish the internal strength, to increase the danger, and to protract the continuance of the disease.”

Every one must admit the force, as well as good feeling, evinced in these remarks ; it is, therefore, to be regretted that they are not more frequently kept in mind by medical men when required to treat any one of the various disorders comprised under the term “Nervous ;” whilst, if the above-quoted remarks are more applicable to one form of these maladies or one patient of this class than another, they certainly are to the victims of nervous sexual debility, as a neglect of them is almost sure to occasion much unnecessary anxiety and suffering.

As I think that one fact is worth a bushel of theories or a volume of assertions, I will here relate a case out of many similar ones which have fallen under my notice, in order to show the mischief occasioned to patients by a display of indifference such as that I have referred to.

An officer in the army called to consult me under the impression that he was suffering from Spermatorrhœa. After having asked him such questions as the nature of his case required, and made an examination of some discharge which he brought me, thinking it to be seminal, I found that he was one of that difficult class to treat, an imaginary sufferer under the malady. I expressed an opinion to this

effect, but found that he, nevertheless, remained deeply impressed with the notion that he was labouring under *Spermatorrhœa* in its worst form. Upon this I questioned him further as to his grounds for thus thinking ; and then it came out that before coming to me he had applied to a notorious quack firm, who had assured him that every time he urinated, semen was passed in the urine, and consequently he was labouring under a most aggravated form of *Spermatorrhœa*. He was further told that if he did not place himself under the care of the firm, and take their celebrated remedies, he would have softening of the brain ! For the cure thus offered to him, the modest fee of four hundred guineas was demanded. This amount was not obtained from him, but he was defrauded out of a considerable sum of money during the period he remained under their care.

Upon my expressing surprise that an educated man like himself should have applied to such fellows, and saying that I thought his conduct very foolish, he replied that, situated as he had been, he did not think he had acted so very foolishly. I asked him what he meant, upon which he told me that, before he had gone to the quack firm, he had consulted one of the most eminent members of the medical profession ; and that this gentleman evidently listened to his narration of his case with great impatience

and indifference, and upon the conclusion of his history handed him a prescription, saying: "There, take that for six weeks, and if it does not do you any good, I don't know what will." The interpretation the patient put on this conduct and the remarks was, that he need not trouble himself to call again. Judging from this reception that he would fare no better if he applied to any other equally well known and eminent member of the medical profession, he was induced, by seeing the specious advertisements of the quack firm, to seek their aid. After several interviews I had the pleasure of fully removing his groundless fears. On the war with Russia occurring, he went to the Crimea, and remained there during the whole campaign. On his return he called on me, and said that, notwithstanding the privations and fatigue he had in common with the rest of our army undergone, he was stronger and in better health than he had ever been before.

Now I have the pleasure of personally knowing the professional gentleman here referred to, and during the last forty years have been in the constant habit of meeting him in consultation, and I am sure, from my knowledge of him, that this behaviour resulted from no intentional unkindness on his part, but solely from the unfortunate feeling of reluctance to attend to such cases, which, both from my own observations and from information obtained from

patients, I know to be entertained by too many members of the profession; and I would fain hope the knowledge that such conduct is calculated to drive patients of this class to seek the aid of some one of the numerous and infamous impostors* (*self-dubbed M.D.'s and surgeons*) *who infest this metropolis, will be alone sufficient to prevent any medical man from pursuing a similar line of conduct.* I am well aware that patients of this class are often most tedious in the narration of their cases; that the details they conceive themselves bound to enter upon are most painful, not to say disgusting, to hear; nevertheless we must, as in many other instances in the discharge of our duties, submit with patience, taking the rough and smooth with equal equanimity, and in the special cases in question, we should endeavour to forget the patient's vices in his woes.

In further illustration of the evil results of this professional prudery, I will give the particulars of a case on which I was consulted in the year 1876. The patient in early youth had practised self-abuse to a great extent, and continued the bad habit up to the

* For a complete exposure of the system adopted by these men in establishing and carrying on their fictitious medical firms, [the snares they set to entrap their victims, and the gross frauds they practise, see the introductory remarks by the Editor to the translation of Dr. Pickford's "True and False Spermatorrhœa;" also "The Revelations of Quackery."

period of puberty. On attempting sexual intercourse he found himself impotent ; he had frequently visited females with a view to intercourse, but had invariably failed from the want of the power of erection. Sometime before my seeing him he formed an attachment to a beautiful girl of eighteen, but doubtful of his powers, he spoke to his father on the subject. This gentleman ridiculed the idea of his incapacity, said it was only nervousness, and he would be all right when married. Nevertheless, they determined that one of the most eminent surgeons of the present day should be consulted. This gentleman, without making any examination as to the condition of the generative organs, and on the mere statement of the patient's case, adopted the father's view, and recommended marriage. Still doubtful, a physician of the greatest eminence was consulted, and he also, without making any examination, concurred in the opinions expressed by the patient's father and the surgeon previously consulted. In full reliance on the correctness of the opinions expressed, the patient married two or three months before my seeing him. But he had never been able to consummate his marriage. I need scarcely say how utterly miserable he was, whilst his wife, a beautiful young girl of eighteen, with strong passions, was nearly frantic from being exposed to such ungratified excitement as her wretched position placed her in.

Upon my making an examination of the generative organs, I found them most imperfectly developed, scarcely so much as in a boy of eight or ten years of age. And I therefore cannot but think that had the gentlemen referred to condescended to have made a similar examination they would never have given the fatal advice they did, the more especially when they had been informed of the previous failures of the patient on his attempts at intercourse. But in addition to this, I should have thought the very appearance of this wretched being would alone have been sufficient to cause the gravest doubts as to his capacity, inasmuch as he was an exceedingly little, ill-grown young man, no hair on his face, effeminate in manner, with a shrill squeaky voice, and, in short, without any of the attributes of manhood. For my own part, had I met him in society, I should at once have set him down as being but one degree removed from an eunuch.

As various remedies had been given him without success before he consulted me, I could only express my regret at his painful and hopeless condition. We parted and I have not heard anything more of him.

During the year 1877 I had been consulted by several patients who had married, without ever previously having had intercourse, on the advice of medical men, and then found themselves utterly unable to accomplish the sexual act. In the majority

of similar cases which I have met with during my forty-nine years' experience, I have found that the greater portion of these patients have practised the habit of self-abuse up to the period of marriage, and hence have been more or less indifferent to sexual intercourse. Others have refrained from intercourse from religious scruples, although those scruples have not prevented them indulging in their guilty habits. Again in many instances the habit has been abandoned, although practised in early youth, and intercourse refrained from, from pure religious convictions.

Now nothing in the whole course of my long professional career has caused me more profound anxiety than the question as to the advice I should give to such patients, when they consult me previous to their marriage, as to the propriety and safety of that step; and I have experienced the same anxiety as to the question of recommending sexual intercourse as a cure for too frequent nocturnal emission produced by self-abuse.

I am aware that many of the most eminent men in the profession declaim loudly against advising illegitimate intercourse for such a purpose, and I recollect a conversation I had some years ago with the late Sir B. Brodie on this very question. Speaking together on the subject of too frequent nocturnal emissions, and sexual intercourse as a remedy, he asked me what I recommended my patients to do. I

replied frankly, that in certain cases I recommended sexual intercourse. "But, Mr. Courtenay," exclaimed Sir B. Brodie, "that is immoral!" "Well," replied I, what do you advise?" "Why," said Sir Benjamin (looking down and rubbing his hands), "I tell them sexual intercourse is very desirable, recommend them to marry, and then leave them to do as they like!" "Well," Sir Benjamin replied I, "it appears to me you give much the same advice as I do, only you wrap yours up." My old friend smiled, but made no reply. But to revert to the vital and all important question, as to how far medical men are justified in giving their sanction to patients who have previously failed in all their attempts at sexual intercourse, or never made such attempts from religious or other motives (as the fear of becoming diseased), to contract marriage, I would observe that to my mind it is a fearful responsibility, and perfectly unjustifiable for a medical man to recommend such parties to marry without first testing their power. I know by making such a plain statement of my views I shall raise a cry of immorality against myself, but nevertheless I must have the courage of my opinions, and thus boldly declare them. At the same time, I beg my readers not to imagine that because a patient has too frequent nocturnal emissions, or doubts as to his sexual power, that I advocate an indiscriminate recourse to sexual congress as a means of cure. Far

from it. I am daily consulted in such cases without any necessity for my giving such advice. Indeed, I have been consulted in my time by hundreds of patients who have never had sexual intercourse, and who, having engaged themselves to marry, have from some cause had doubts on the subject of their powers, whom, after investigation of their cases I have confidently recommended to marry without fear as to the result. I recollect that in the year 1875 I took upon myself to advise such a patient to marry. He promised to do so, but added the to me not very alarming threat, that if he proved impotent he would come back and shoot me! However, in the month of August, 1876, I received, instead of a visit from him to carry out his threat, a letter announcing that his wife had been safely delivered of a boy, which (of course the doctor and nurse declared) was a very fine one, and added, "I have you alone to thank for this unexpected bliss, and I do so with a grateful heart."

But there is too frequently a sad reverse to such a gratifying result. Such a case was the one I have just referred to; and I hold that in cases where any serious doubt as to the capacity of the patient for sexual intercourse exists, the medical adviser should do one of two things, viz., either frankly and boldly recommend the patient to test his powers, or else decline to take upon himself the responsibility of sanctioning the contemplated marriage. No medium

course is in my opinion admissible, and this not merely in regard to the interest of the patient, but in respect to a far more important point, the happiness of some innocent woman.

I would here give the particulars of the case of a patient who most unexpectedly found himself after marriage nearly impotent, and remained so for a period of seven years, and was then under my treatment completely cured. The history of the case is fully given in the following letter, which the patient sent when he first consulted me:—

June 2nd, 1877.

“Dear Sir,—Having read with great interest your book ‘On Certain Functional Derangements of the Generative System’ I venture to ask you to be kind enough to send me by letter your advice on my case, the details of which I send below.

“I am thirty-three years old, of a nervous and anxious temperament, and constitutionally have a feeble circulation, which shows itself in occasional numbness and deadness of fingers, but I have always enjoyed fair health, never having been laid aside by illness.

“For about two years—from fourteen to sixteen—I practised masturbation to a small extent—I believe, at intervals never less than two weeks—often more. I had no involuntary emissions until

"nineteen, when, being overworked at college, they
"came on all at once, with great frequency, but by
"medical advice they were diminished by tonic
"medicine. I continued, however, to have them at
"intervals varying from about four days to a
"fortnight, for some years.

"I have been married about seven years, and as
"I had occasionally the involuntary emissions, I
"consulted Dr. ——— of ———, and his treat-
"ment benefited me, but did not quite cure me.
"Since my marriage I have never had proper con-
"nection with my wife; the penis has never
"penetrated more than half its length, and often
"the attempt has been a complete failure. The
"erection is not strong enough, and it subsides
"too soon. Last night I had an involuntary
"emission, but I did not feel weary and overdone,
"as I sometimes do. The semen is thin and watery,
"but I feel confident if I could only obtain a proper
"connection that would become more healthy. I
"have never suffered from any venereal disease, or
"attempted connection with anyone but my wife,
"and I should not have married had I thought
"that I could not perform the husband's part.

"I am sorry not to be able to see you, but it
"will be impossible for me to visit London for
"some time,—perhaps not till next year. I should
"be very glad to follow any treatment you would

“ kindly suggest for the purpose of obtaining proper
“ sexual connection.

“ I am, yours faithfully,

“ _____.”

After some further correspondence this gentleman placed himself under my entire care, with what result the following letter will show :—


“ January 2nd, 1878.

“ Dear Sir,—I find the organs have improved in
“ power so much lately that I look upon myself as
“ cured.

“ I should not, however, like to run the risk of a
“ relapse, but I should be inclined to think that in
“ a case where the restoration has been so gradual
“ there cannot be much risk, especially if I carefully
“ follow your advice in leaving off the medicines
“ gradually. I shall then have taken the remedies
“ a full six months, which you thought at the
“ commencement of your treatment would be suffi-
“ cient to effect a permanent cure.

“ I am fully sensible of the value of your opinion,
“ based, as it is, on such long especial experience,
“ and do not wish to act contrary to it if it can
“ possibly be avoided, and should you strongly
“ advise a longer continuance of remedies I will
“ endeavour to do so.

“ I beg to thank you very heartily for your kind



"attention to my case, and rejoice the remedies you
"have supplied have been so successful.

"I am, yours truly,

"_____."

Having every hope that the cure effected would be permanent, I, in reply, expressed an opinion that it was not necessary for him to do otherwise than I had before suggested, viz., gradually discontinue the use of the medicines.

Just as this was going through the press I received another and last letter from the patient:—

"January 24th, 1878.

"Dear Sir,—I think there is no occasion for me
"to continue the treatment any longer. My wife
"seems satisfied as to the connection being proper.
"She is now suffering from nausea and vomiting,
"which, I imagine, may possibly be a sign of
"pregnancy, and, should it, prove so, it will be a
"sure evidence of my cure.

"Again thanking you for your kind attention to
"my case.

"I am, yours truly,

"_____."

Some months after, I heard that his wife had given birth to a healthy child.

I am very anxious to press these various subjects on the consideration of my professional contempora-

ries because I have seen so much unhappiness result to patients from their neglect. With every care on the part of a medical man, patients of this class often take offence at what they imagine to be a display of indifference on the part of their medical attendant. I flatter myself I am in the habit of listening with attention, and treating with kindness and every proper consideration, all patients who consult me, and yet I have found patients fancy otherwise, as the following case will show, *and* at the same time illustrate the morbid sensitiveness of the class of patients I am now referring to.

A young clergyman residing in the country consulted me on his case; one of *Spermatorrhœa*, as he imagined. He stated that he was sure there was an escape of semen on his voiding urine, and in order to determine the point he brought me some for examination. I however, could not detect any appearance of semen, and after making every necessary inquiry into his case, I came to the conclusion that marriage was all that was required for the removal of the symptoms of which he complained. I entered very fully into his case with him, and thought I had satisfactorily explained away the symptoms which had caused him unnecessary alarm, and we parted. Some time after this he called upon me again, and asked me if I remembered his case. I answered, "Perfectly." "Well," said he, "I am afraid you

“will be angry with me, and say I have been very
“foolish, when I tell you that, thinking you did not
“attach sufficient importance to my case, or else
“might be wrong in your opinion, I went to Dr. Khan
“after seeing you, and he examined my urine and
“told me that it contained semen. He then gave
“me a frightful description of the consequences of
“Spermatorrhœa, and wound up by saying he was
“the only person in England who could cure the
“complaint, and if I would place myself under his
“care, he would cure me for the sum of twenty
“guineas. As this appeared a very reasonable
“amount, I agreed to his terms, and paid the money.
“I then returned into the country, taking with me
“a supply of medicines. I wrote to him from time
“to time for some two months, and received more
“medicines. I also occasionally sent up to him
“some urine for examination. At length I was told
“the appearance of semen in the urine had ceased,
“and I was, consequently, cured. To this communi-
“cation I replied, it was strange to me that if I was
“cured I should still have as far as my feelings
“enabled me to judge, all the symptoms which had
“led me to consult him in the first instance, and I
“must therefore beg he would continue his atten-
“dance. Several letters passed between us on this
“subject, but finding I could not get any more medi-
“cines from him, I resolved on going up to London

“and having a personal interview with him. I
“accordingly came up yesterday and called on him
“this morning. He desired me to pass urine, and
“proceeded to examine it; and no sooner did he do
“so, than he exclaimed, ‘My God! you are very bad.
“‘There is a great quantity of semen in your water.
“‘Oh, you are much worse than I thought; your
“‘case is a dreadful one. It will take a great deal
“‘of time, perhaps years, and much money—five
“‘hundred pounds—to cure you.’ I was perfectly
“astonished at this, and reminded him that I had
“already paid him the money he had demanded as
“the price of my cure. ‘Oh,’ replied he, ‘that was a
“‘mistake. I did not think you were so bad. I
“‘must have more money. How much have you got
“‘in your pocket?’ I was foolish enough,” con-
“tinued the patient, “to admit I had ten pounds
“with me, and although I now saw the true character
“of the man, and was resolved to have nothing more
“to say to him, yet, in order to get out of his house,
“I gave him that sum, and I have now come to you
“to ask you to give me your opinion once more.”

“Well,” I said, “what can I do to satisfy you?
“I feel convinced there is nothing the matter with
“you, and that you have been duped by the man you
“have applied to, who, by-the-bye, is not a physician,
“and is nothing more or less than an impostor.*

* The party referred to was the proprietor of Kahn's Museum.

"Well," continued the patient, "it strikes me that although the man is an impostor, he may be right in his assertion that I am labouring under Sperma-torrhœa; and that although you did not formerly detect any appearance of semen in my urine, it is possible that he did on the many occasions on which he examined it, whilst, as you only examined it on one occasion, there might possibly not have been any then, and at other times a great deal." "Of course this was possible," I said. "Well, then," urged the patient, "will you object to make a daily examination, for a week or ten days, of a portion of all the urine voided during that period?"

I replied, if he desired it I would do so, although I thought he was putting himself to much unnecessary trouble and expense. However, finding that nothing short of this would satisfy him, it was so arranged.

I made the examinations required, and never once detected any trace of semen in the urine, upon which he wrote to express his thanks to me, adding that the result was such a lesson to him as would prevent his ever again becoming the dupe of the Khan class of men.

Again, some medical men without at all entering on the question as to the reality or non-reality of these maladies, affect to consider these cases "nasty,"

and on these grounds seek to avoid undertaking their treatment. Others boldly declare, that as most of such cases are the result of unnatural and immoral habits, the sufferers are justly punished for their conduct, and are unworthy of the attention and sympathy of any one.

Now I conceive this to be a monstrous fallacy ; for surely it is entirely beyond the scope of any medical man's duty to sit in judgment on the applicants for his professional services. According to my idea of professional duty, every man is bound to do all in his power to afford relief to every sufferer who seeks it at his hands, without question as to the causes and nature of the malady. When he has afforded the desired relief, or whilst he is doing so, he may with perfect propriety avail himself of his position to point out in a kind and christian spirit both the physical and moral evils which excesses of all descriptions will entail on those who practise them. Such a line of conduct, whilst it could not fail to gain the confidence and gratitude of the patient, would also be one of the best means of putting an end to the frightful system of quackery and extortion which is now so extensively and successfully carried on by a host of impostors whose filthy advertisements disgrace the pages of the majority of the newspaper press of this country.

As I have already remarked, the publication of

M. Lallemand's work in France, and its subsequent translation and publication in this country, had the effect of directing the attention of a portion of the profession to the special diseases of which it treats. There can be no doubt that such a result was calculated to confer considerable benefits both on the profession and on this class of patients. Nevertheless, it is a question in my mind whether the evils which have indisputably resulted from the exaggerated representations which the work contains in respect to the consequences of Spermatorrhœa, as also from the fallacious and dangerous method of treatment recommended, and from other causes to which I shall presently allude, have not greatly outbalanced any benefits which the work might otherwise have conferred ; for, unfortunately, when M. Lallemand's work first attracted the attention of the profession in this country, little or nothing was known of these diseases. Medical men in England had therefore neither theoretical nor practical knowledge wherewith to guide them to a correct estimation of the soundness of his opinions and conclusions, or the merits or demerits of the mode of treatment which he recommended ; whilst, at the same time, the high position which M. Lallemand had attained in France, gave such apparent authority to his statements and opinions, that they were almost universally received here with implicit faith. Hence every sexual hypochondriac—

every patient who in reality or imagination laboured under any form of generative incapacity or debility—every one who suffered from nocturnal emissions—nay, even those who did not suffer from them,* as also every person who observed slight oozing of mucus from the orifice of the urethra, with or without the occurrence of an erection of the penis; or who experienced a mucus discharge on visiting the water-closet, was held to be labouring under Spermatorrhœa, and at once cauterised! A fallacy at whose shrine thousands have been mercilessly sacrificed! However, had the implicit faith with which Lallemand's doctrines and mode of treatment were received been confined to the profession, the evils resulting from them would have been in a great degree cured by time and the results of increased experience. Indeed, I conceive it would be impossible for any intelligent member of the profession to have frequent opportunities of treating this class of patients, and fail to arrive at any other conclusion than that Spermatorrhœa is neither so frequent a disease *per se*, nor in conjunction with sexual hypochondriasis, or various other forms of sexual debility, nocturnal emissions, and other discharges, as Lallemand represented, as also that the means of cure recommended

* In this latter case, the absence of nocturnal emissions was attributed to the occurrence of diurnal involuntary seminal emission on the patient's urinating.

by him are neither so efficient nor so safe as he asserted.

But, unfortunately, the perusal of Lallemand's work was not confined to the profession; on the contrary, it obtained a large circulation amongst the public, or, at least, that portion (no inconsiderable number) who in reality or imagination suffered under some one of these maladies. Hence Spermatorrhœa became a familiar term in the mouths of this class of patients; and the same implicit reliance which the well-established reputation of the author obtained with the profession, acted, if possible, with greater force in leading the general reader to receive all the doctrines of Lallemand as established facts. Thus every real or imaginary sufferer under some one of the above diseases, immediately attributed all his maladies to the existence of Spermatorrhœa. The popular delusion thus sanctioned by such apparently high medical authority became at once, and has ever since been, firmly established in the public mind.

At the same time, the clear-witted and infamous traders in this class of maladies were not slow in detecting the opportunities these popular delusions offered them of still further practising on the credulity and fears of the real or imaginary sufferers under Spermatorrhœa and other disorders of the generative system. And thus from that time to the present their filthy advertisements, and still more filthy

works, were filled with references to Lallemand's statements and opinions, accompanied with the most frightful accounts of the frequency and consequences of the disease ; whilst every patient who chanced to fall into their hands was sure to be told that he was labouring under Spermatorrhœa, and straightway a system of terrorism and extortion was put in practice towards him which, to those who have not had opportunities of becoming acquainted with the nefarious proceedings of the advertising quacks would appear utterly beyond belief.

Thus, as I have remarked, it is more than doubtful if the good M. Lallemand's work was calculated to confer on the profession and the public, by calling attention to this class of disease, has not been out-balanced by the professional fallacies and popular delusions to which it has given rise.

As I have before stated, it is now upwards of forty-nine years since my attention was first directed to the special consideration of the diseases of the genito-urinary organs. During this lengthened period I have enjoyed such extensive opportunities of acquiring a practical knowledge of these maladies as I trust it is not presumptuous in me to say has fallen to the lot of but few of my professional contemporaries. On recalling to my remembrance the results of my first ten years' experience, and comparing them with those of my later years, and what I now every

day hear and see, I find the sentiments of the profession and the ideas and feelings of patients totally different from those which prevailed at the commencement of my professional career. I now find these diseases more or less acknowledged in the profession as real ; and I further find that professional journals, which in bygone days contained articles the gist of which went to prove these maladies ideal, and those who asserted the contrary, men whose only object was to batten on the credulity and fears of imaginary sufferers, now not only recommending the study and treatment of this class of disorders to the profession generally, but even pointing out the advantages likely to result from medical men becoming 'specialists' in this department of medical and surgical practice. So much for the changes with reference to professional opinions on this subject ; and the changes are no less remarkable in the opinions of patients as to the nature of these ailments. For whereas in former years patients would come and explain, in plain language, the symptoms which led them to infer they suffered under some form or degree of sexual debility, now they come, one and all, with the same cuckoo cry of suffering under Spermatorrhœa.

Let us now look to the earlier periods I am referring to. What were the real or imaginary complaints on which we were consulted in those days ? What

were the popular delusions of those times in relation to derangements of the generative system?

It will be sufficient for my present purpose to divide the patients of those days into two principal classes. In Class I., I place young men varying in age from eighteen to twenty-four years, who came complaining of suffering from nocturnal emissions, to which they sometimes rightly, but more often wrongly, attributed a host of evils, both mental and physical, under which they suffered or imagined they suffered, just as in these days young men of the like ages come complaining of Spermatorrhœa as the source of their real or imaginary ailments. In Class II., I range those patients of a more mature age, say from thirty to fifty, who apply, complaining of a partial or general loss of power in the reproductive organs. These patients formerly attributed, sometimes correctly, sometimes incorrectly, their condition solely to the result of venereal excesses either with women or from unnatural habits acquired in early life, or to some constitutional defect. At present this class, like the first, attribute their sexual debility, under the prevalent popular delusion, to Spermatorrhœa, produced by the same causes; and in this opinion those medical men who still adhere to Lallemand's fallacies will confirm them; whilst the class of impostors to whom I have already referred will not hesitate to confirm them in the same delusion with

an oath, if their so doing would add an additional guinea to their ill-earned gains. Nevertheless, I feel warranted, from many years' attentive study of this question, solemnly to declare my conviction that it is impossible for the medical man or the patient to entertain a greater fallacy than to attribute sexual debility, in the majority of cases, to the existence of Spermatorrhœa. Repeated observations have convinced me that Spermatorrhœa, to such an extent as to be injurious to the vigour of the generative system, or to the general health, so far from being the almost constant cause of the different forms of sexual debility of which patients complain, is, on the contrary, a most rare one.

So rare have I found the occurrence of involuntary seminal losses to such an extent as to warrant the conclusion that they have occasioned the symptoms of debility complained of by the patient, that I have been perfectly surprised at the results of my investigation of the subject. Attracted in common with others in the profession by M. Lallemand's publication, I was especially led to fresh investigation, with a view to test the correctness of the theories advanced by him on these questions; and although, on becoming acquainted with his opinions and representations as to the nature, extent, and consequences of involuntary seminal losses, I was immediately satisfied of their exaggerated character,

I was totally unprepared to find his opinions on these subjects and his mode of treatment so utterly fallacious and dangerous as I now believe them to be. On first commencing my microscopical examination of the samples of urine and urethral discharges voided at the water-closet, and on other occasions by patients, and failing to detect any evidence of the presence of semen in the great majority of instances, I feared this result arose from a want of experience and dexterity on my part in the use of the microscope. Hence I repeatedly obtained the assistance of two medical friends who had for years been familiar with the use of this instrument. Finding they were no more successful than myself in detecting the presence of semen in a great number of samples which I sent them at different times, my suspicions as to the rarity of this kind of seminal losses became confirmed, and daily increased experience has more and more fully established this conviction in my mind.

Briefly, then, I would state, as the result of forty-nine years' experience and assiduous investigations, in many thousands of cases, that in more than half of the instances in which urine and mucus discharges collected on glasses have been brought to me for examination by patients who had been told, or who have fancied (the majority were among the former class), they were suffering from involuntary seminal losses on urinating and on other occasions, I was

satisfied that there was no foundation for such opinions ; whilst, even in a considerable number of these cases in which I did detect semen, I found that the urine, or the mucus discharges, which were collected daily and brought to me, did not perhaps contain semen more often than once in every third or fourth sample, and very often the intervals were extended to from four to ten days ; and on all these occasions the quantity of semen was so small, that it would have been ridiculous to suppose so trifling a loss of this secretion could (except through the influence of the mind) produce any sexual debility. In a few instances I found patients subjected to very frequent and copious involuntary seminal losses—mostly occurring on voiding the fæces. But these cases most certainly formed the exceptions, and not the rule.

With such results of so many years' observations I can arrive at no other conclusion than that the too prevalent idea existing in the profession, that to Spermatorrhoea is to be traced most of the instances of sexual debility and derangements of the generative system, of which patients so frequently complain, is a professional fallacy, and the like belief amongst patients nothing more nor less than a popular delusion, pregnant with fearful sufferings to those who, labouring under it, are induced to submit to the cruel, dangerous, and inefficient method of cauteriza-

tion recommended by M. Lallemand, or the caustic injections treatment adopted by others. In cases of True Spermatorrhœa, and in which there is no doubt that the involuntary seminal losses are the cause of the patient's sufferings, the application of solid lunar caustic, or the employment of caustic injections, is equally inefficient and dangerous.

I might adduce a great many examples of the mischief and suffering occasioned to patients from the adoption of these methods of treatment, but the limits I have assigned myself in the present publication will not allow me to relate more than three or four instances.

The following history was contained in a letter addressed to me by a gentleman residing in the country :—

“Between the age of twelve and fourteen I commenced at school the practice of masturbation, and continued in it with some slight intermissions till I was sixteen or seventeen. I was then first made aware of the mischief I was too apparently doing my constitution. I found, on relinquishing it, that I was troubled with nocturnal emissions once or twice a week, sometimes more frequently. I remained in this state until I was twenty. About this time I was led to consult —, who represents himself as a legally qualified M.D. After paying him most awfully, I left his care in the same

"nervous state as when I applied to him, suffering
"still from nocturnal emissions and great difficulty
"in retaining my urine. After this I lay still for a
"time ; indeed, until I happened accidentally to
"fall in with Mr. McDougall's work 'On Sperma-
"torrhoea.'" (The patient evidently refers to Mr.
McDougall's translation of M. Lallemand's work.)
"I immediately placed myself under his (Mr.
"McDougall's) care, and ultimately went and stayed
"a week at his house ; he examined my urine, and
"discovered involuntary diurnal as well as nocturnal
"seminal emissions, and advised me to submit to
"cauterization, which I did, and did not feel any
"more pain at the time than from the mere passing
"of a bougie, which he had done recently. I now
"left his house, as he hoped this cauterization would
"be sufficient for my cure. I, however, continued
"to take his medicines ; but, as I found no benefit
"either from the operation or the medicines, he again
"advised me to submit to cauterization, as he
"fancied that the action of the caustic was inter-
"rupted in the first place by some urine in the
"urethra. I went to town, and on this occasion he
"passed an instrument first, and afterwards another
"charged with caustic. I cannot say that I experi-
"enced any great degree of unpleasantness from the
"operation. The sensation was something similar to
"the pricking of a needle. This time I had a

"copious discharge for several days. I felt but little benefit from the last cauterization. However, Mr. McDougall told me I had now only nocturnal emissions, as he could not detect any semen in the urine. After this I withdrew myself from his care. I have suffered up to last spring with the nocturnal emissions, which occur sometimes two or three times a week, and then cease for an interval of three or four weeks. I have great difficulty in retaining my urine, especially if I take a glass of beer or spirits. About nine months since I applied to a surgeon here, who is considered clever; but I could find that he was not at home with my complaint. However, he advised me to submit to cauterization, which I did. The operation was attended with a good bit of pain, and produced considerable inflammation, accompanied by a dreadful pain at the time of micturition, as also a discharge which lasted nearly a month. Ever since this I have had a smarting pain every time I make water, and the emissions continue."

Having in reply to this communication requested the patient to favour me with a personal interview, he some short time afterwards called upon me. Thinking it advisable to ascertain the condition of the urinary canal, I attempted to pass such a sized bougie (a No. 10) as should have at once passed to the bladder, but I found its progress arrested within

an inch of the orifice of the urethra. Upon this I tried various smaller sized instruments, but with no better success ; and finally, I found I could only, and that with difficulty, succeed in passing a very small flexible catheter, less in size than a No. 1 bougie. In the further passage of the instrument to the bladder, I felt it pass through two more exceedingly broad and indurated strictures—one about two inches down the urinary canal, the other just at the commencement of the membranous portion of the urethra.

In addition to these evidences of the serious nature of the injuries inflicted by the cauterizations, there was extreme sensibility and spasms throughout the whole course of the urethra.

In answer to my inquiries, I learnt that the patient had never suffered under any venereal diseases or from Gonorrhœa, nor had he laboured under such a degree of sexual debility as to prevent his indulging in sexual intercourse whenever it so pleased him. In short, originally he had nothing to complain of beyond the occurrence of occasional nocturnal emissions, such as most young men suffer from who have not opportunities of regular sexual intercourse, after having abandoned the vice of self-abuse.

This case does not merely illustrate the dangers of cauterization *per se*, but it is also full of instruction in regard to the evils I have referred to in the pre-

ceding pages as flowing from the Spermatorrhœal monomania now so prevalent both in and out of the profession.

First.—A young man who has, like too many others of his age, been initiated into a baneful habit, which it is not necessary further to describe, ultimately, on becoming sensible of its injurious character and immorality, abandons the practice. Upon this, like every young man who does not have regular sexual intercourse, he suffers more or less from nocturnal emissions. It may be as a result of the irritability and morbid excitability which is always more or less occasioned by the practice referred to, and which very generally remain long after its abandonment, that in this instance the emissions were somewhat more frequent than a young healthy man who had not indulged in this kind of excess would experience: but there is no reason for thinking they were so frequent as to be very injurious; for he was in good health, and could indulge in sexual intercourse whenever he wished, and had an opportunity of doing so. Suffering, then, under these emissions, his attention was attracted by a quack advertisement, containing references to nocturnal emissions, Spermatorrhœa, &c., and he was thus led to consult the fellow, and as a matter of course was assured that he was labouring under Spermatorrhœa, and the announcement was followed up by the usual description

of the terrible nature and consequences of this malady;—he became for a time the dupe of the quack, who lost no time in fleecing him. At length he could stand the exorbitant demands made upon him no longer, and he withdrew himself from the quack's care. He had lost his money, but he had fortunately escaped without injury to his health. Well would it have been for him had the lesson he received opened his eyes completely to his delusion; but unfortunately they were only half-opened. He saw the man under whose care he had been was an impostor, but the Spermatorrhoea monomania remained in full vigour; and hence he sought further aid, and applied to the late Mr. McDougall. Now I say it with all due respect to the memory of that gentleman, that the patient could not have made a more unfortunate selection; for this gentleman was, so to speak, saturated with all M. Lallemand's theories and exaggerations, as well as a follower of his dangerous method of treatment. The severe strictures of the urethra which resulted from the cauterization are a sufficient commentary on the treatment adopted by this gentleman and by the medical attendant in the country.

A gentleman came from India for the purpose of placing himself under my care. He informed me that he had suffered under repeated attacks of Gonorrhoea, and had altogether led what is called a

free life, both in regard to indulging in sexual intercourse and in drinking. His last attack of Gonorrhœa left an obstinate gleet, and he observed shortly after, that on going to stool, a glairy mucus secretion was discharged from the urethra. He likewise found his general health failing, and he gradually lost, or nearly so, the power of sexual intercourse. The surgeons whom he consulted in India prescribed various medicines without benefit. At length it was suggested that the patient's symptoms were the consequence of Spermatorrhœa. An examination of the discharge evacuated on going to the water-closet was made, and it was pronounced to contain Spermatozoa. Cauterization on Lallemand's plan was recommended and adopted. The patient describes the pain as having been *most intense*, both at the time of the operation and for some hours after it. The scalding, on voiding urine, *was awful*, and the difficulty so great as nearly to amount to retention. A *profuse discharge, tinged with* blood, which continued for some days, was produced by the application of the caustic, and blood was passed every time the patient voided urine. No benefit resulted from the operation. After some time the operation was repeated, and succeeded by the train of symptoms already described, and so again on one or two more occasions. The patient derived no benefit from these severe measures; but, on the contrary all his former sym-

ptoms remained, with the addition of others of a worse character; for he now suffered under a constant and severe pain in the urethra, which was increased to an almost unbearable degree of intensity in passing urine; deep-seated pain in the perineal region, darting backwards towards the rectum; and when he had emission on connection—which he could rarely accomplish—the darting, cutting, and burning sensation which he experienced along the course of the urethra and perineum were of a most distressing character. Every time he voided urine, or evacuated the fæces, there was the same glairy discharge which he had at first, and which his medical attendant said contained semen. Reduced by the very means adopted with a view to his cure to this deplorable condition, he was induced, through the advice of a friend of his who had been a patient of mine, to come to England for the purpose of placing himself under my care.

Apprehensive that the spasms, pain, and difficulty in urinating, although too evidently occasioned in the first instance by the cauterization, might now be maintained from the formation of a stricture, I proceeded to examine the urinary canal with a full-sized bougie (No. 10). Its passage along the whole of the anterior part of the urethra occasioned unusual pain; and as soon as it reached the posterior portions, the pain was so intense, and the spasms so violent

that I was compelled to withdraw the instrument before it had passed to the bladder. However, on a subsequent occasion I was able to pass a No. 4 metallic bougie to the bladder; and although its passage gave more pain than is usual on the introduction of instruments, yet the pain was not so unbearable as on the first attempt.

As it was evident that this condition of the urethra would, if allowed to continue, lead to no other result than the formation of one or more permanent strictures of the worst character, I determined to attempt its removal by a careful course of bougies, aided by appropriate medicines.

Accordingly, bougies (commencing with one of so small a size that its introduction caused comparatively little pain), smeared with a preparation of belladonna, were regularly passed twice a week, and a mixture, containing infusion of buchu, tincture of hyoscyamus, &c., prescribed.

Under this treatment, all the more urgent symptoms subsided in the course of little more than two months, and a full-sized bougie could be passed with ease. The discharge at stool and on urinating occurred less frequently, and was smaller in quantity. Tonics and cold bathing were now prescribed, and steadily persevered in for some months, and ultimately the patient perfectly recovered and returned to India a married man. I have recently been

attending a relative of his, from whom I learn that the patient continues well, and is the father of three or four children.

In August, 1863, I had a patient under treatment, aged 28, who has never been able to accomplish sexual intercourse. Before placing himself under my care, he had been induced to submit, on several occasions, to cauterization, at the hands of a surgeon of eminence. The patient informed me that he experienced great pain from the operations, and that they were on each occasion followed by considerable bleeding from the urethra, whilst the pain for some days after the operations was perfectly dreadful. Indeed, his sufferings were so severe that, notwithstanding the surgeon urged him to continue the treatment, he abandoned it as unbearable. I need scarcely add that, in regard to his malady, he was in no way benefited by this cruel treatment.

I mentioned the particulars of this case in a former Edition as far as relates to the effect of the caustic treatment. At that time (August, 1863) the patient had only just placed himself under my care; I have now to add that by the following month of January, 1864, he was entirely cured, and the last time I saw him he informed me that he was about to be married.

Further, in relation to the dangers attending the use of caustic, a surgical friend informed me that he had been sent for in great haste to a

young gentleman suffering under most alarming hæmorrhage from the urethra. Upon his arrival he learnt that the patient had just been induced to submit to the caustic injection treatment, at the hands of an advocate of this mode of asserted cure. It appeared that in the performance of the operation a long glass tube, having a syringe attached to it, had been passed down the urethra to a considerable distance, and then the caustic injection, by means of the syringe attached to the glass tube, was forcibly thrown into the canal. My friend further informed me that the hæmorrhage was so profuse, and the patient's exhaustion so great from it, that for some time he entertained the greatest fears for his life. The hæmorrhage continued more or less for ten days after the first alarming attack. Upon my inquiring if Mr. — (the gentlemen who had employed the caustic injection) had been informed of the result of the operation, I was told he had not, as the patient did not wish to see him again.

In September, 1864, a gentleman consulted me, complaining of suffering from frequent nocturnal emissions. He also informed me that he was not able to effect sexual intercourse properly in consequence of the erections always ceasing before any emission of semen took place. This patient about a year ago had been induced to submit to the caustic injection treatment with the glass tube at the hands of the gentle-

man who operated with such alarming results in the preceding case. Of course this treatment utterly failed in stopping the nocturnal emissions. But this was not the worst of the matter; inasmuch as the irritation resulting from the caustic injection has given rise to the formation of a severe spasmodic, if not permanent, stricture of the urethra. Learning from the patient that, ever since the use of the caustic injection, he had experienced considerable uneasiness in the urethra and some dribbling of urine after passing water, I deemed it necessary to introduce an instrument into the canal in order to ascertain its condition. Upon passing a No. 10 metallic bougie down the urethra, its progress was stopped at the bulb and the point violently grasped. On withdrawing this instrument I endeavoured to pass one of a smaller size (a No. 5), but the spasms were so strong that I could not pass it. Under these circumstances, and as the patient was only in town for the day, I thought it best not to continue the attempts to pass an instrument. I prescribed for him some soothing remedies, warm baths, &c., and recommended him to come up to town again in the course of a fortnight or three weeks, with a view to the removal of the stricture which evidently existed. I had a letter from him afterwards, and he informed me that the medicines I had ordered him had decidedly lessened the irritation previously existing in the urethra.

In the summer of 1851 I was consulted by a tradesman, who had been cauterized by a medical gentleman well known as a great advocate of this mode of treating Spermatorrhœa. The patient told me he suffered dreadfully on the performance of the operation, and that a few days after he was attacked with inflammation of one of the testicles, which confined him to his bed for some time. On his recovery he found he had derived no benefit from the severe treatment which had been adopted. Upon my asking him if he had informed the gentleman who had operated on him of the consequences which had resulted from the cauterization, he replied he had not done so, as he did not desire to have anything more to do with him.

mention the circumstance of the surgeon in these cases not having been made aware of the untoward results of their respective treatments, because I have so often been astonished and at a loss to reconcile the bold assertions of the advocates of cauterization, and the caustic injection treatment, to the effect that they never have had in their *own practice* any instance in which unpleasant results had followed their treatment, when I know of many cases in which these parties have themselves operated with anything but pleasant results to their unfortunate patients. The statement that the patients did not inform their medical attendants of the conse-

quences of the cauterization may explain away the difficulty. At all events, I would hope that their repeated assertions of the safety and nearly universal success of their mode of treatment proceed rather from the fact that all their patients have thus silently "cut them," than from a reckless disregard on their part, both of truth and of the sufferings of the victims to their dangerous modes of treatment.

I might continue to repeat instances in which patients have, in addition to those detailed in the preceding cases, been made to suffer in every possible way from this system of cauterization,—as for example, from severe rigors, retention of urine, profuse hæmorrhage, &c.; but it is surely unnecessary, after the instances related, to add anything to the proofs which they afford of the inefficiency and danger of cauterization. Besides, I fancy some of the gentlemen who adhere to M. Lallemand's doctrines, and profess to practise his treatment, are not quite so insensible as they would have us believe to its severity. Be this as it may, I find some of them now recommending the application of the caustic in a modified form; that is, in the shape of injections, varying in strength from ten to twenty grains of caustic to an ounce of water. The solution thus made is, by means of a syringe, forcibly injected down the whole course of the urethra; thus exposing both the sound and the diseased portions of the urinary canal to the action of the

caustic solution. When I say diseased portions, I must not be thought thereby to admit the correctness of the doctrine of M. Lallemand and others, that *Spermatorrhœa* is mainly due to the existence of chronic inflammation or morbid irritability of the *veru montanum*. In using the term here, I merely do so by way of illustrating the mode of practice. The gentlemen who recommended and pursue it say it is unattended with any untoward results. My own observations and experience of the effects of using a caustic injection of even ten grains to an ounce of water, both in cases of real or imaginary *Spermatorrhœa*, or in gleet, have led me to a totally different conclusion. I never saw an instance in which such an injection was used that the patient did not complain of considerable pain,—in many cases, I have seen them walk about the room twisting their bodies about in great agony; and, in addition, they have felt the most painful desire to urinate, accompanied by spasmodic contractions along the whole course of the urethra. In other cases actual retention has occurred; and I have known the irritability and spasmodic action thus excited continue long after the more urgent symptoms have ceased. Indeed, the patient has often appeared to have recovered entirely, but on indulging in some excess in sexual intercourse, or in drinking, or even from exposure to cold, he has been attacked with violent

spasms, and perhaps even with a total retention of urine.

The spasmodic irritability thus excited by the caustic often produces an attack of spasmodic stricture, and this in its turn leads to the formation of one or more permanent strictures of the urethra, as the previously related cases show.

But that I may not be supposed to deal in general assertions, I will here relate a case which will serve to illustrate the serious and permanent evils which the use of strong caustic injections does sometimes produce, notwithstanding all that is said of their invariably harmless nature.

About forty years ago, a young gentleman, who was at that period at college, contracted a gonorrhoea, which, after some time, terminated in a gleet. Anxious to get cured, he came to London and placed himself under the care of a surgeon; but finding every means fail in removing the discharge, it was at length determined to try the effect of a caustic injection. Upon this being done, the patient immediately experienced the most intense pain, accompanied by violent spasmodic contractions along the whole course of the urinary canal, and on his next occasion to void urine, it was only with great difficulty that he succeeded in expelling a small quantity. From this period he began to experience difficulty in passing urine, and also became liable to sudden attacks of

spasms and retention of urine. Ultimately these attacks were so severe and frequent, that he was obliged to give up the usual amusements of a country gentleman,—hunting and shooting. At length, about a year before I saw him, he came up to London and placed himself under the care of a very eminent surgeon of one of our metropolitan hospitals; but he returned to the country without deriving any material benefit from this gentleman's treatment. Finding himself much worse after his return home, he a second time came to London, and placed himself under the care of the gentleman whom he had before consulted; but, somehow, no progress was made in the removal of the strictures, and a profuse hæmorrhage having been produced, as he fancied, from the violent way in which an instrument was on one occasion passed, and to which succeeded a severe attack of retention of urine, he withdrew himself from this gentleman's care, and, by the advice of a friend of his, applied to me.

I treated this case by the application of the kali, with such benefit to the patient, that in the course of three weeks he appeared to be completely relieved; indeed, for a period of two years, the only inconvenience he experienced from the malady was the necessity of occasionally passing a bougie. But after that period the attacks of spasms and retention returned, and in the course of four years after my first

seeing him, he was so tormented by them, that he came to London and placed himself under my care, and I again apparently afforded him complete relief; nevertheless he has, over and over again, been obliged at different times, up to the present, to seek relief from my hands; for although he regularly passes bougies himself, the spasms somehow always gain ground on him, and then the attacks of retention come on. Thus we see the long-continued annoyance and suffering which the employment once only of a caustic injection may inflict. The mischief entailed on this patient will only cease with his life, while it is even not improbable that it may cause his death.

I have selected this case to illustrate the mischief which the use of caustic injections may produce, because it not only shows us the immediate results which follow the employment of this kind of injections, but in addition affords us the somewhat unusual advantage of ascertaining, through a long series of years, the career of the patient, and the life-long evils entailed on him by one single act of mistreatment.

A gentleman from India consulted me in the autumn of the year 1870. He informed me that with the idea he was labouring under Spermatorrhoea, he had consulted several surgeons in that *country* at different times. Two of these gentlemen

had repeatedly cauterized his urethra for the cure of his supposed malady ; one of them, he asserted, more than a hundred times ! He described his sufferings from these latter operations as most severe, whilst he had not experienced the slightest benefit in regard to the relief of his supposed malady.

Upon examining his urethra I found a stricture of so severe a character that I could not pass even the smallest bougie through it to the bladder. It is not my purpose to give all the details of the treatment, but I may state that the severity of the stricture was so extreme, and the difficulties I experienced in its treatment were so unusual and so great, that I requested the late Sir William Fergusson to afford me the benefit of his great skill and experience in regard to its treatment, In the course of the conversation which arose at this consultation, the subject of cauterization in reference to the treatment of real or imaginary cases of Spermatorrhœa naturally came under discussion. Sir William informed me that the results of his experience were against that method of treatment in such cases. He added that during the last year several cases of stricture, which he believed had been produced by cauterization, had come under his observation and care. And, strange to say, the gentleman who had treated these cases was one who had previously treated by caustic injections several patients who had subsequently con-

sulted me for Spermatorrhœa, and whom I had found to be labouring under stricture, the result, as I believe, of the employment of the caustic injections.

The following case was likewise treated, before my seeing the patient, by this gentleman. I received the accompanying letter in due course :—

“DEAR SIR,—I am anxious to consult you, and intend to be in London during the summer, when I will call upon you. It is probable, however, that I shall not stop more than ten days ; and it has occurred to me that possibly you might be able to prescribe for me in the meantime. If you think it of any use, I will send you an outline of my case, and, of course whatever fee you wish. If not, I must merely wait until I can see you. I may add, that I have recently read a pamphlet of yours on the matter which I wish to consult you about.

“ Believe me, yours truly,

“ ———.

“ April 28, 1870.”

I replied to the effect that if he would send me the particulars of his case I would give him my opinion thereon to the best of my ability. In a few days afterwards I received the following letter from him :—

“ DEAR SIR,—I am much obliged for your note, and I will make my case as clear to you as I can.

"I am twenty-eight years of age. For some time
"past I have been suffering from Spermatorrhœa, for
"which in 1866 I consulted a surgeon in London,
"who used a caustic injection, and advised me to get
"married. Some benefit seemed to result from the
"operation, but it was very transient, and in a short
"time all the old symptoms returned with the addi-
"tion of some new ones, including two strictures.
"Consequently, I again went to the same surgeon;
"the strictures were with difficulty removed, one of
"them proving remarkably tight and intractable. I
"have called upon him whenever I have been in
"London, and had instruments passed every morning
"for ten days or a fortnight. He has also given
"me injections of chloride of zinc, and prescribed
"quassia, tincture of iron, phosphoric acid, &c. I
"have carefully followed his directions with regard
"to cold baths, gymnastic exercise, &c., but I do not
"think I have derived the slightest benefit from his
"treatment. He has, however, always said there
"was very little the matter with me, and urged me
"to get a wife, advising me to have the caustic
"injection repeated two or three weeks before
"marriage. With regard to my present state; the
"local symptoms are not very severe; nocturnal
"emissions do not occur more frequently than once
"in ten days on an average. Sometimes two or three
"weeks without any, and then several at short in-

"tervals, but they are oftener *without than with*
"dreams, and generally followed by more or less
"depression, and feeling of uneasiness in the passage.
"Diurnal emissions do not occur, excepting after
"excitement, when I notice a slight discharge of a
"thick perfectly-colourless fluid. I suffer a good
"deal from what I suppose are the usual nervous
"symptoms, and especially from an extremely irri-
"table state of the heart, which is very trying.
"Within the last two years I have undergone an
"operation for varicocoele, but am still troubled with
"a feeling of uneasiness and pain in the testicles
"when I walk or stand for long.

"When I last attempted sexual intercourse (about
"six years ago) I had no difficulty in accomplishing
"it, but I have my doubts whether that would be
"the case now.

"Since that time I have most studiously avoided
"all impurity both of thought and deed, and done
"everything I could think of to prevent emissions.

"I ought perhaps to mention that sometimes I
"feel a strong desire to make water, and find very
"little in the bladder. This, however, is not very
"troublesome. In other respects I have very fair
"health—appetite good and regular, sleep well,
"bowels rather apt to be constipated. Though of
"slender build (height 6ft., weight 12st.) I have
"very considerable muscular strength.

"I think I have told you everything that is of importance. I will only add that you may rely upon my following to the letter whatever course you may suggest, and I shall be most deeply grateful if you can do anything for me.

"Believe me, yours faithfully,

" _____

"F. B. Courtenay, Esq.

"May 3, 1870."

Such is the history of the case as related by the patient. I cannot say what may be the opinions of my future readers in relation to the first treatment, and after advice given by the surgeon; but for my own part I have no hesitation in stating that, in my opinion, the treatment was most injudicious, whilst the subsequent advice was most irrational. Now as to the latter. From the account of the patient we learn that a surgeon has produced, by his so-called method of curing *Spermatorrhoea*, "two severe strictures, which were with difficulty removed, one of them proving remarkably tight and intractable," and compelling the patient in after years, whenever he came to London, to submit to the *daily* passage of instruments for ten days or a fortnight. Yet, notwithstanding such results, the same surgeon, with extraordinary *sang froid* and apparently idiotic blindness to the result of his first use of caustic,

recommends the patient at a future period to submit to the same treatment again, in spite of the "remarkably tight and intractable" stricture which had clearly resulted from the first use of the caustic injection! this too, in face of the well-known proneness of all strictures, and especially of "tight and intractable" ones, to relapse without fresh exciting causes arising. Why, with the knowledge which the most inexperienced of us have as to the proneness of all strictures to recur, it must, I should think, appear to every one little short of insanity in any man to recommend a second edition of the caustic injection, after such results had followed on its first use. And then again, at what a period was it to be done! "Two or three weeks before marriage!" Truly a pretty preparatory course to the discharge of matrimonial duties! One might almost with certainty as to the result make an affidavit that before the proverbial "honeymoon" had waned, the victim (I do not mean of marriage, but of surgery) would again find himself afflicted with "tight and intractable stricture." Really I have no patience with men capable of such monstrous folly. What the patient thought of the matter will be best shown by an extract from a letter he wrote me in reply to one I had written him on his case, wherein I incidentally mentioned that another patient who had been under the treatment of his old friend, had placed himself under

my care for the removal of a stricture produced by the same cause as his own. "As to my old friend" — (as you call him) you will observe that if a surgeon in treating any case can adopt a method which will necessitate the patient's returning to him in a few months, the result is highly satisfactory to the surgeon! This is precisely what happened in my case, and I most deeply regret that I did not come under your charge some years ago, instead of wasting time over treatment that was worse than useless."

The following two cases I relate here, as I am writing fresh matter for this new edition, although they have nothing to do with the questions in more immediate discussion.

Captain — consulted me on September 2nd, 1870. He informed me that he had just returned from abroad, and wished to have my opinion on his case. It appeared that he was a married man, and that his wife had had one living child, and had also twice miscarried. About three years before my seeing him he suddenly lost all power of erection, and consequently all capacity for sexual intercourse. In answer to my inquiries, he could assign no probable cause for this sudden loss of power. But writing to me some ten days after my first seeing him he said:—"My wife in a letter the other day mentioned a circumstance which I had totally

“ forgotten. A short time before this affection first seized me I was out surveying one very hot day, and suddenly appeared to lose the use of my right hand; the affection lasted a short time, and then went off, and I thought no more about it. However it may throw some light upon the case. The hand felt quite numb, and I could not hold my pencil for about a quarter of an hour.”

The treatment adopted in this case comprised externally stimulating embrocations along the whole course of the spine—salt and water bathing. Internally, tonics, stimulants, especially such as are known to act on the generative organs. The treatment was commenced on 3rd of September, 1870, and continued up to the present time of writing (March 30th, 1871). With what result the following letter addressed to me by the patient will best show :—

“ DEAR MR. COURTENAY,—I hope you will excuse my neglect in not having answered your last letter before, but to tell you the truth, I was very busy when I received it, put it aside, and did not find it again till two days ago. I think I am now better than I have been yet, the erections are strong, and the desire for sexual intercourse is much increased, and there has been no premature emissions.

“ Believe me, yours truly,

“ March 9, 1871.”

“ _____.

A gentleman, aged thirty-two, consulted me January 17, 1871. He informed me he was just married, and had come up to London on a wedding trip. But to his horror and grief he found himself utterly unable to perform the sexual act. It appeared from his statement that he had never attempted sexual intercourse before his marriage. But he had unfortunately practised the habit of self-abuse to a great extent. He remained in town under my immediate care for about ten days without any improvement resulting from the treatment adopted. He then left London, arranging with me to conduct his future treatment by correspondence. The result of the treatment—which was a combination of sedative and tonic remedies—adapted, will be best shown by the following letter :—

“DEAR SIR,—I have nearly finished the last
“medicine ordered, and I think I am quite well.
“For the last five or six weeks I have been able to
“have connection satisfactorily. Would you advise
“me to continue the medicine, and is there any fear
“of a relapse? Hoping to hear from you by return,

“I remain, dear Sir, yours very truly,

“March 14, 1871.”

“_____.”

Returning now to the subject of the employment of caustic; I would say let the medical man who contemplates the treatment of Spermatorrhœa by

the caustic injection method, so much recommended, pause and ask himself if he is justified in exposing his patients to such a life of after-suffering as the preceding cases show, even if he were thereby sure of curing them. How much the more, therefore, should he hesitate when it is scarcely doubtful that he will, by employing this treatment, expose his patients to these terrible risks, with little—nay I will go further than this, and positively assert—with no prospect of benefit!

Now the advocates in this country, both of the method of treatment by cauterization with the solid lunar caustic and of caustic injections, not only repeat M. Lallemand's assertions as to the entire immunity from danger of these modes of treatment, but they add their own assertions to the same effect. Indeed, if we were to credit these gentlemen's reports of the ordinary result of their use of caustic and caustic injections, little or no pain is caused thereby, and in two or three days all effects of the caustic applications disappear. Not one solitary case is adduced by them to show us that sometimes the effects of the caustic are more lasting and serious; yet if they have been so *strangely fortunate* in the results of their own practice, which the cases I have related show to be more than doubtful, they cannot be unaware that their own authority and model has not been equally so. Quoting him, referring to him

as they do, they must surely be aware that, in numerous instances, his own account of the symptoms following on the application of the caustic is directly opposed to their representations.

If this be the case (and I will prove it to be so by-and-bye) what confidence can we place in any of their assertions? If they are capable of slurring over or suppressing all reference to the records which Lallemand himself has placed before his readers of the effects of the caustic lasting for a period of nearly three weeks, how can we credit their representation of such different results in their own practice? Now, if the reader will procure M. Lallemand's work in the original language (I say in the original language, because the details I am about to give are suppressed in the translation) he will find M. Lallemand in one case saying, "I performed "cauterization, from the neck of the bladder as "far as the membranous portion of the urethra. "During five days the *urine was bloody*; the "patient's agitation was increased, *and other accidents* "occurred" (unfortunately M. Lallemand does not tell us what the "*other accidents*" were), "but from "the sixth to the fifteenth day these symptoms rapidly diminished." Here we see, instead of two or three days, it is fifteen before the "accidents" resulting from the caustic ceased.

In another case he says, "I proposed cauterization.

"which was performed rapidly over *the neck of the bladder*; and more slowly over the mucous surface of the *prostate*; the pain was very severe, but diminished very quickly." It further appears that "long-continued" baths and other remedies were necessary to allay the inflammation which the application produced. In the case of another patient, he says, "I cauterized the membranous portion of the canal; *acute and long-continued pain followed, and the urine was bloody.*" Three weeks elapsed before the inflammation subsided in this instance.

Again, in another instance we are told, "I slightly cauterized the bladder near its neck, and more severely the prostatic portion of the urethra, closing the instrument before it reached the bulb. The operation produced its *usual effects*. Five days after the urine no longer contained blood" (from this statement it would appear that the "*usual effects*" of the operation are to cause a five days hæmorrhage from the urethra whenever the patient had occasion to void his urine), "and within fifteen days, it passed *without pain or inconvenience.*" So that, in addition to voiding bloody urine for five days, the "*usual effects*" involve a prospect of fifteen days more to be passed before the patient can expect to void his urine without pain or inconvenience.*

In another instance we find that, "immediately after the operation there was a pressing desire to

“urinate, and blood passed with the urine. During the following night he (the patient) experienced a painful seminal emission; he passed urine only once, but with *acute burning pain*. On the following day, the patient only passed urine four times, *but always with burning and a slight discharge of blood.*”

I think that the reader will agree with me, that the above is tolerably good evidence that the operation of cauterization does very generally (at all events in France) produce, to us in the mildest terms, some unpleasant consequences; whilst the remarkable discrepancy which we find between the asserted results of the operations, according as they are performed by the practised author or by his imitators, is “passing strange.” Judging by the light of my own experience, as well as from the information I have received both from professional men* and from patients, I am convinced that M. Lallemand’s accounts afford a correct description of the “usual effects” resulting from the application of caustic to the urethra. Consequently, the contrary statements of his imitators can only be regarded (especially when

* One day meeting the late Sir B. Brodie, I asked him his opinion of cauterization as a means of curing Spermatorrhœa. The reply of this distinguished surgeon was, “I have never known it to do any good, but have often known it to do much harm.”

we see, as the above extracts from the original work of M. Lallemand show, how they have suppressed all reference to the "accidents" he so candidly and fairly relates) as totally unworthy of our belief.

I trust that the remarks I have made, supported as they are by the cases I have related, will be sufficient to convince the reader that the method of treatment recommended by M. Lallemand and others is not so free from ill consequences as they would fain make us believe. I shall, therefore, no longer dwell on this point. But as it is not improbable that some of my readers may say to themselves, "Well, it may be all true enough that strictures of the urethra and the other ill consequences adduced by Mr. Courtenay, and even detailed by M. Lallemand, have been now and then produced by the method of cauterization, and by the use of caustic injections; yet as this disease is very distressing, and often difficult of cure, whilst, according to M. Lallemand and others who practise these methods, they are nearly always successful, in removing the disorder by one cauterization, or the use of one caustic injection, it is still worth while to incur all these risks with the prospect of obtaining so prompt and certain a cure." I say, as patients may thus probably think or speak, I would now proceed to inquire how far these representations are warranted by the experience of those who

have directed their attention especially to this point.

The results of my own observations as to the asserted safety and efficiency of these methods I have already stated, and supported my views by the cases I have already related. I have also stated the answer I received from the late Sir B. Brodie and the late Sir W. Fergusson, as to the result of their experience, and their answers fully accord with my own views. At the same time the English writers on this question are so few that little or no impartial information on these points can be derived from this source. But fortunately for the elucidation of our inquiries, no such reluctance exists in the members of the medical profession in France and Germany, to study and treat this class of maladies, as I have had to animadvert upon as existing amongst ourselves; and we are, therefore, enabled to obtain from these sources much valuable practical information on all points connected with our subject.

Thus with regard to the question of the almost invariable success which is stated to have attended the caustic treatment, we find there are no more grounds for this claim than for the asserted freedom of this treatment from pain, suffering, and danger.

Dr. Wintrich, whose opinion, Dr. Pickford remarks, must be the more unbiassed, inasmuch as he has himself expended considerable labour on the im-

provement of the porte-caustique, writing to a medical friend, thus expresses himself: "In the meantime, I must acknowledge to you that I attach but little value to cauterization, either in Spermatorrhœa or in Stricture, although, in too great reliance on Lallemand's representations, I at first used it frequently, and sometimes abused it. I have, in eight years cauterized twenty-nine individuals for imaginary, and sometimes for real Spermatorrhœa: but only in two cases have I found permanent improvement; in the majority, only a transient amelioration; and in some, even, an aggravation of the malady."

Donné says that he has seen patients who have been treated by cauterization, not only by others, but by Lallemand himself, who yet were not cured.

Remak also says of Lallemand, after having spoken of the unquestionable services which he has rendered to suffering humanity—"He (Lallemand) has, however, by an exaggerated representation of the consequences of Spermatorrhœa, and of the effect of cauterization in curing it, not only injured the value of his contributions to science, but likewise injured the patients themselves; inasmuch as, by reading his book, they have been thrown into a disconsolate state about the future, almost amounting to despair, when the vaunted

“infallible remedy of cauterization has not produced the promised effect.”

Dr. Pickford also relates instances of similar failures. It is, therefore, I think, pretty evident that the caustic treatment involves considerable risks of not merely aggravating the patient's sufferings, but of adding other afflictions to them, whilst the prospects it offers of a permanent cure are very slight indeed, and most assuredly not such as would induce a prudent man to adopt it on the slender chance it offers of affording relief.

But when, in addition to the risk of some one of the ill consequences already referred to resulting from the employment of the lunar caustic, either in the solid form or in solution, and the uncertainty—indeed, little prospect—of relief they afford, it becomes known that there are, in truth, very few cases of so-called *Spermatorrhœa* in which it would be necessary to employ them, even if they were capable of accomplishing all that their advocates assert, I am sure that every prudent surgeon will set his face against the reckless way in which some practitioners, by their use of both the solid caustic and caustic injections, are jeopardizing the future welfare and comfort of their patients.

To those who in reality or imagination only are suffering under *Spermatorrhœa*, I would say: Read over and reflect well on the facts which I have in

the preceding observations submitted, as well as on the further ones I shall by-and-bye submit to you, before you permit caustic, either solid or in solution, to be applied to the urethra. Do not allow yourselves to be led away by mere assertions, no matter how apparently respectable the party may be who makes them. I have presented you with cases, which, if need be, I can authenticate, and I advise you, if you should feel disposed, notwithstanding what I have said, to submit to this treatment, to demand of its advocates some reference to those who have undergone it. Be satisfied with nothing short of this; and then, at all events if any ill consequences should result, you will not have so much cause to reproach yourselves with imprudence as you would if, in the face of the facts I have placed before you, you submitted yourselves to the treatment on the faith of mere general assertions of safety and efficacy.

With these words of earnest caution, both to my professional and to my non-professional readers, I shall take leave of this portion of my subject.

I have already stated as the results of many years' minute investigation of cases of Spermatorrhoea, or at least so-called, under the influence of the existing monomania on the subject of involuntary seminal losses, that, in more than half of the instances in which I have been applied to, I have found that

the patients did not labour under any such losses at all, although they had in most cases been previously assured they were suffering under them to a great and alarming extent. These assurances, I should say, had in almost every instance been made to them by some of the advertising quacks.

In a considerable number of the remaining instances in which semen was found in the urine, or glairy mucus discharges (mostly collected on the patient's going to the water-closet), the intervals were so long between their occurrence—say, for periods varying from four to ten days—and the quantity so small, that it was evidently ridiculous to suppose such losses could have produced (save through the influence of the mind) either the general or the local debility of which the patients complained.

And lastly, I have occasionally found patients suffering from frequent and considerable diurnal involuntary seminal losses—such losses mostly occurring at the water closet—and others have suffered from too frequent nocturnal emissions; but, as I have already remarked, all these cases formed the exceptions, and not the rule. To these remarks I would add that I have every reason to believe that such discharges may happen to healthy and vigorous men, and that, therefore, the mere fact of their occurrence, must not be regarded as indisputable evidence of disease.

I have hitherto only referred in general terms to the subject of voluntary diurnal and nocturnal emissions, their causes, and the evils they occasion, either to the general health and strength of the patients, or on the power and vigour of the generative and copulative functions. It now, however becomes necessary for the elucidation of the result of my experience, and the views I have formed therefrom, that I proceed to a more full consideration of this subject.

The patients who usually apply for our medical assistance in these cases of true or false Spermatorrhoea—as aptly expressed by Dr. Pickford, in order to distinguish the real from the imaginary sufferers under the complaint—I should divide into three classes.

In the first class of this division I place the purely imaginary sufferers.

In the second I place patients who are really suffering under a deranged and morbid sensibility of the nervous system, accompanied by a greater or less degree of mental and physical depression, as well as various anomalous and distressing symptoms which, with more or less correctness, they attribute to voluntary or involuntary seminal emissions.

In the third I would place those patients who are really impotent, and those who, although still, to a certain extent, able to perform the generative or

copulative functions, are yet incapable of discharging them healthily.

Now, the generality of these patients, on applying to us, will, with more or less truth, attribute their imaginary or real disorders to their past excesses; occasionally, especially with such patients as have been long resident abroad, the excesses will have been committed in sexual intercourse. But in by far the majority of instances, patients attribute their condition to the effect of self-pollution, commenced in boyhood, and too generally continued up to the ages of eighteen or twenty, and not unfrequently to a much longer period.

Patients of the first division are almost always found to be young men, varying in age from eighteen to two or three-and-twenty. The histories we gather from them are something like what follows. A lad, by some unfortunate circumstance, acquires the habit of self-abuse, and follows the infatuating and delusive practice to a greater or less extent for a series of years. Suddenly his notice is attracted by an advertisement of some work (mostly by a quack), in which a reference to the habit, and its destructive consequences, is broadly made. His curiosity, and it may be, his fears excited, he secretly purchases and reads the book, and therein finds the most fearful pictures of the ill effects the habit he has indulged in produces. Alarmed by these highly-coloured representations,

he resolves on immediately abandoning it. Firm in his resolution, he abstains from his evil practice for days, and doubtless he at once feels himself stronger for so doing. He congratulates himself on his discovery of the ill consequences which might have resulted, had he remained in ignorance on this point, and continued his evil habit. He now hopes to escape scathless; when, lo! he is startled by the occurrence of one or more involuntary nocturnal emissions. Now he is horribly alarmed; as he finds in the books I have referred to that nocturnal emissions are paraded amongst the first and most serious consequences of the habit he has acquired; and as he now imagines himself attacked with the first of the asserted ill consequences, he is fully persuaded that he will very shortly suffer from a long catalogue of terrible disorders always so graphically described in the kind of works he has purchased. **Maddened by** these fears, he too often rushes for aid to the apparent authors of them, when his fears are sure to be worked upon for the vilest of purposes. He will be told to **urinate, and a pretended examination of his urine** will be made, and he will thereupon be assured not only that he is suffering from nocturnal emissions, but that his semen is passing away from him continually in his urine; to this will succeed representations that if these diurnal and nocturnal emissions are not stopped, the spinal marrow and brain will

waste away ; and finally the patient become impotent and even idiotic ! Having thus worked upon the victim's fears, his pocket will next be attacked, and an enormous fee demanded for his cure—even to the extent of hundreds of pounds—aye, I may say thousands !

Now if such a patient had chanced to fall in with any work on the subject in which this terrifying system was avoided, as, for instance, with Dr. Pickford's valuable treatise, he would have altogether escaped from his unnecessary anxieties and false alarms. He would then have seen that all healthy unmarried men, or those who do not indulge in regular illicit intercourse, are more or less subject to occasional involuntary nocturnal emissions, and that, so far from such emissions being evidence of disease, their non-occurrence would be an indication of some defect in the generative economy. Of course, this is supposing that such emissions are not too frequent, and the patient to be in the enjoyment of good general health. But even when such emissions are somewhat more frequent than might be strictly considered normal, yet their occurrence on the cessation of the habit referred to is not of so much importance as some medical men and all patients deem. I am frequently applied to by nervous young men thus suffering. In such cases, I first explain to them as above, that every healthy man is more or less liable to have nocturnal

emissions ; consequently that there is no need for them to be alarmed on that account ; and even if the emissions occur somewhat more frequently than can be strictly considered natural, this is only to be regarded as the more or less inevitable result on the first abandonment of their evil habits, inasmuch as the effect of such habits has been to produce both a state of excessive excitability of the sexual organs generally, as well as a morbid activity in those organs whose special functions are the secreting of the seminal fluid ; and hence, until the organs have had time to recover from the morbid excitement of both sensation and secretion into which they have been thrown, so to speak, by the habit referred to, these emissions must be expected. Nevertheless, they will in most instances gradually cease if the patient refrains from indulging in lascivious ideas, adopts a moderate diet, and takes plenty of out-door exercise. However, should they not, they can easily be kept within their natural limits by proper medical treatment.

The following case will aptly illustrate the dangers to which inexperienced youths are exposed from being unnecessarily alarmed by the occurrence of involuntary nocturnal emissions.

A young gentleman (an officer in the army when I saw him), by the advice of one of the surgeons of his regiment, called on me in the month of November, 1851, for the purpose of consulting me. As the

particulars of his case, as narrated to me at our first interview, became subsequently embodied in a bill in Chancery, I shall give the history of the case from the statements made in that document, merely omitting the legal forms, phrases, and technicalities, which, however necessary to legal minds, will, I fancy, be no assistance to the general reader's proper understanding of the case.

This document commences by the statement that, "In or about the year 1849, when the patient was "about nineteen years of age, and residing in the "country under the charge of a private tutor, he "imagined that his health was injuriously affected, "and in consequence of such imagination, and by "reason of his youth and inexperience, he became "and was alarmed and disturbed in his mind about "his physical condition. And that while in this "state of alarm and anxiety about his health, he (the "patient) read in some public newspaper an advertisement of a treatise written and published by "Samuel La'Mert, of 37 Bedford Square, in the "county of Middlesex, the defendant, which was "entitled 'Dr. La'Mert, on Secret Infirmities of "'Youth and Maturity, with forty coloured engravings on steel.'" Then follows in full the advertisement of a work entitled "Self-Preservation," pretty much as it may be seen daily advertised at the present time. It, therefore, need not now be quoted.

The plaintiff next states that "he was induced by the terms of such advertisement to write to the defendant, La'Mert, and the latter sent him 'the said treatise;' in return for which the plaintiff forwarded to the defendant postage stamps in payment."

The plaintiff's statement then continues thus: "From a perusal of the said work, the plaintiff became still more alarmed about his health, and was led to write to the defendant upon the subject of his health; and after one or two letters had passed between them, it was arranged that the plaintiff should come up to London, and consult the defendant personally; and accordingly, in the month of June, 1849, the plaintiff did come up to London, and call upon and consult the defendant upon the state of his health, and the defendant then and there examined him, and questioned him as to his health and the habits of his life; and the plaintiff, relying on and placing full confidence in the defendant as his medical adviser, answered all his inquiries, and fully, and without reserve, communicated to him all the particulars relating to the malady with which the plaintiff supposed himself to be afflicted. In the course of the conversation which then took place the defendant asked the plaintiff what was his situation in life, and what were his means, and his future ex-

“pectations ; and the plaintiff stated that the truth
“was, his pecuniary resources were then rather limited,
“but that on the death of his father, who was a baronet
“and of a noble family, the plaintiff, as his eldest son,
“would inherit a considerable fortune, and the baro-
“netcy. The defendant then represented to the
“plaintiff that the disease under which he laboured
“had produced impotency, and that the most fatal
“consequences would ensue from such a disease un-
“less its progress was stayed, and he described the
“effects of the said supposed disease in such a
“manner as to induce the plaintiff to believe that his
“life and happiness were in the greatest danger.
“But the defendant then also stated that he could
“cure the plaintiff of the said supposed disease, and
“could prevent the occurrence of the dreadful con-
“sequences he had so described, if the plaintiff would
“accede to the terms which the defendant then pro-
“posed ; and he then further stated that he was will-
“ing to undertake to cure the plaintiff, if he, the
“plaintiff, would secure to him the sum of two thou-
“sand pounds as his fee. Although the plaintiff was
“much alarmed at those statements of the defendant
“respecting the disease under which he alleged the
“plaintiff to labour, and as to the effects thereof, he
“declined to agree to the proposed terms. However,
“notwithstanding this refusal, after some discussion
“between the defendant and the patient, the plaintiff

“became so much terrified and distressed at the representations and statements of the defendant, that he consented to the terms proposed by the defendant as aforesaid; and the defendant then and there sat down and drew up a paper in which the plaintiff was made to acknowledge himself to be labouring under impotency, and to promise in consideration of the defendant’s undertaking the treatment of his case to pay him the sum of two thousand pounds on the death of his father: and the defendant required the plaintiff then and there to sign the said paper; and the plaintiff did, under the influence of the terror which the defendant’s representations and threats had created in him, comply with the said defendant’s said demand, and did then and there sign the said paper accordingly, and gave the same to the said defendant; and the defendant thereupon gave the plaintiff some medicine, which he alleged it was necessary that the plaintiff should take, and which the defendant alleged would effect a cure of the disease which he stated the plaintiff to be labouring under.”

The narrative then proceeds thus:—“In fact, the plaintiff was not labouring under any disease whatever when he saw the defendant as aforesaid; and when he so, as aforesaid, signed and gave to the said defendant the said paper, although he was induced by the defendant’s representation to suppose

“that he was labouring under the said supposed disease.

“The plaintiff had not any opportunity of consulting any person whatever before he signed and gave the said paper to the defendant, but he was wholly in the power of the said defendant, who took advantage of the plaintiff's youth and inexperience, and abused the confidence which plaintiff had reposed in him as his medical adviser; and before the plaintiff signed the said paper, the defendant had, by his representations, reduced the plaintiff to such a state of nervousness and terror, that he was wholly unfit to think or act for himself.

“The defendant did not give to the plaintiff, nor suggest to the plaintiff to take, any copy of the said paper, nor has the plaintiff now, nor has he ever had, any copy thereof; and the defendant continued, after the meeting hereinbefore mentioned, to occasionally supply the plaintiff with medicines for the said supposed disease, and the plaintiff continued to take such medicines, but without deriving any benefit therefrom.

“Shortly before the plaintiff attained the age of twenty-one years, and in or about the month of April, one thousand eight hundred and fifty-one, while the relation of patient and medical adviser subsisted between the plaintiff and the defendant, the defendant wrote to the plaintiff, requesting him

“to give the defendant a promissory note or bill
“for the said sum of two thousand pounds, for which
“he had obtained from the plaintiff the said paper
“as aforesaid : and he enclosed to the plaintiff the
“proper stamp, with a written form to be copied by
“the plaintiff thereon. The plaintiff at first hesi-
“tated to give the said note or bill ; but being still
“under the impression which the before-mentioned
“representations of the defendant had made on him,
“and being excited, nervous, and terrified by the
“statements which the defendant had made to him,
“and his own dread of exposure, and the defendant
“having repeated his applications for the said bill or
“note, the plaintiff, copying from the said form fur-
“nished by the said defendant as aforesaid, drew
“upon the said stamp a promissory note or bill for
“two thousand pounds, payable six months after the
“death of his father, and sent it to the defendant,
“who duly received the same. But the plaintiff,
“having kept no copy thereof, is unable to state
“accurately whether it was a bill or promissory note
“which he so signed and sent to the defendant.

“The dread of exposure, and the state of terror
“which had been produced by the defendant upon
“the plaintiff, prevented him from consulting, and
“he did not, in fact, consult any person whatever
“before he signed and sent to the defendant the said
“*promissory* note or bill, and he was wholly in the

“power of the defendant with reference thereto, who
“again took advantage of the plaintiff’s youth and
“inexperience, and of the confidence he had reposed
“in the defendant as his medical adviser; and the
“plaintiff was, in fact, not a free agent when he
“signed and sent to the defendant the said promissory note.

“In the following month of July (one thousand
“eight hundred and fifty-one) the defendant attempted to induce the plaintiff to give him a further security for a part of the said sum of two thousand pounds, by an assurance on his (the plaintiff’s life for one thousand pounds, for the benefit of the defendant; but the plaintiff did not give him such further security.

“The plaintiff continued to take some of the medicine of the defendant, but he was ultimately led to believe that he had been imposed upon by the defendant, and in or about the month of April last, became desirous of withdrawing from the hands of the defendant, and of having the said promissory note or bill and paper delivered up; and thereupon the plaintiff wrote to the defendant upon the subject, and in reply he received a letter from the defendant, dated the twenty-ninth day of April, one thousand eight hundred and fifty-two, which was in the terms and to the effect following, that is to say :—‘ In reply to your letter, I think when you

“reflect upon the contingencies that may happen
“before I come into possession of the sum agreed
“on between us, that the amount is not quite so
“great as you make it appear. In the first place, I
“took my chance whether you outlive your father
“and secondly, I may be twenty years before I get
“paid, for it is by no means improbable your father
“may live so long. You are also engaged in a
“hazardous profession, and may be called abroad ;
“when campaigning a morbid effect of climate may
“seriously endanger my prospect, and the only way
“I see to settle this affair at once would be to make
“a reasonable offer of ready cash to end it en-
“tirely. If not convenient to do so, the matter must
“rest as it is. Reflect on it, and write to me again
“when you make up your mind how you intend
“to do.’

“Prior to the receipt of the said last-mentioned
“letter, the plaintiff had obtained a commission in a
“regiment in Her Majesty’s service, and he received
“the said letter when he was with his regiment in
“the country, and he delayed answering the said
“letter. But in the beginning of the month of No-
“vember last, having become convinced that he had
“been imposed upon by the defendant, he came to
“London with a view to obtain advice as to the
“necessary steps to be taken by him in the matter.

“The plaintiff has since consulted two eminent

“surgeons practising in London, and has been advised by one of them, as the fact is, that at the time when he applied to the defendant as aforesaid, the plaintiff was not labouring under any disease that required medical treatment, and the plaintiff has been advised by the other of the said surgeons, as the fact is, that the plaintiff has not laboured under any kind of disease, though he has suffered from an inconvenience to which other young unmarried men are liable.”

As I have already said, this extraordinary history was told me by the patient at our first interview. Upon further inquiry of the patient as to his reasons for thinking himself ill in the first instance, he informed me that the principal cause of his fancying there was something seriously wrong with his generative system was his having nocturnal emissions. He had not the slightest idea that such emissions were the natural result of puberty, and that all young men are more or less liable to have them if they never have sexual intercourse. He also informed me that he had never known a moment's peace of mind since his first consulting Mr. La'Mert, for, what with the fears that individual's statements as to his condition had created, and the recollection of the documents he had signed, he was in a constant state of nervous excitement. The reader may imagine the state he was in, when he learns that the

surgeon of his regiment considered him unfit for his military duties ; and that hence he had, before seeing me, sent his papers (as the term is) to the authorities at the Horse Guards, with the view of giving up his profession.

At the time of his calling upon me he was greatly excited, his tongue white, and, in a word, the whole system afforded evidence of the great nervous irritability under which he laboured. I at once explained to him the nature and cause of the nocturnal emissions, and assured him if he would only cease to torment himself on the subject he would soon be well. Having with great difficulty succeeded in tranquillising his mind on the subject, I then assured him that he need have no fear with respect to the documents in the hands of Mr. La'Mert, as I felt convinced that, if he took proper steps, that person would be compelled to restore them. I then recommended him at once to inform his father of his situation, and his family solicitor ; but as he expressed the greatest objection to informing his family until after he was freed from his liabilities, and, at the same time, earnestly requested me to place the affair in the hands of my own solicitor, I consulted my brother, Mr. Charles Courtenay, of Lincoln's Inn Fields, and, after taking counsel's opinion, it was determined to file the bill in Chancery, from which the above narrated particulars are taken. Upon this being done

an injunction was at once granted to restrain the defendant from negotiating the bill for the £2,000, accepted by the patient, which was served on the defendant without delay.

I should state that I was requested to give a written opinion on the patient's case for the information of the counsel ; I accordingly wrote a certificate to the following effect:—"Having examined " ———, Esq., and received from him an account " of the state of his health and the circumstances " which caused him to apply to Mr. Samuel La'Mert, " I am of opinion that at the time of his so applying " he was not labouring under any disease that required medical treatment, and that all his subsequent sufferings are to be attributed to the mental " anxiety occasioned by the misrepresentations made " to him as to the condition of his health."

I likewise recommended that Sir B. Brodie should be requested to see the patient and give his opinion on his case. Accordingly, an hour having been appointed for the consultation, I accompanied the patient to Sir Benjamin's. The result of our consultation will be best shown by the following written opinion:—

"Having carefully inquired into the circumstances " of Mr. ———'s case, I entirely agree in the " opinion expressed by Mr. Courtenay. I do not " believe that he (the patient) has laboured under

“any kind of disease, though he has suffered from
“an inconvenience to which all young unmarried
“men are liable. The chief cause of suffering with
“him seems to have been mental anxiety, induced
“by certain misrepresentations as to his condition,
“which (as he informed me) have been made to him
“by a person of the name of La'Mert, whom he
“consulted.

“B. B. BRODIE.

“5 Savile Row, November 9, 1852.”

These active steps having been taken, and the patients mind put to rest, the medical treatment was very simple—a few doses of blue pill and saline aperients were all that was required to restore the secretions to a healthy condition, and the patient to a state of health and happiness to which he had long been a stranger.

It now only remains to state the result of the legal proceedings. The defendant did not put in an answer to the bill, and therefore the statements it contains may be considered to be admitted as correct in the main. After certain negotiations and proceedings, which it is not necessary to detail, it was arranged that the case should be referred to the decision of the respective counsel employed, and an umpire, in case the two former gentlemen could not agree. The following is a copy of the written award :—

“ ——— v. LA’MERT.

“ We both agree that the plaintiff is entitled to a
“ decree for the delivery up of the note and all other
“ papers, and that the defendant is liable for the
“ costs of the suit. We differ in this, whether the
“ defendant is entitled to anything for the medical
“ assistance given by him to the plaintiff.

“ J. V. Prior, for the defendant, considers that the
“ plaintiff ought to pay something to the defendant
“ for what the defendant did to him, and that the
“ amount may be estimated as equal to the costs of
“ the suit, so as in effect to give the plaintiff a decree
“ without costs. He relies on the correspondence,
“ especially the latter portion of it.

“ C. L. Russell, for the plaintiff, considers that the
“ alleged medical service was part of the fraud, and
“ ought not to be paid for.

(Signed) “GEORGE LAKE RUSSELL.
“ J. V. PRIOR.”

On this difference of opinion the services of the
umpire were called in, with what result the following
document will show :—

“ I am of opinion that the plaintiff is entitled to a
“ decree for the delivery up of the note and all other
“ papers ; and that the defendant is liable for the
“ costs of the suit ; and that the defendant is not

"entitled to anything for the medical assistance
"given by him to the plaintiff.

(Signed) "C. J. SELWYN.

"Lincoln's Inn, August 5, 1853."

The defendant refused to act on these awards, on the ground that the arbitrators had exceeded their powers in ordering him to deliver up the patient's letters. He, however, offered to abide by the award in this respect, if the plaintiff would forego his costs, thus, in effect, making a demand of some seventy pounds for returning the letters the plaintiff had addressed to him. Of course such a proposal, under the circumstances detailed in the bill, could not be entertained, and it accordingly became necessary to apply to Vice-Chancellor Sir Page Wood, for an order to compel the defendant to act in accordance with the decree of the arbitrators and the umpire ; and on this being done, Sir Page Wood confirmed the award.

I have related this extraordinary case by way of caution to inexperienced youths, and, as the facts speak for themselves, any comments I might make on them would be superfluous.

The following is another example of gross imposition practised on an inexperienced youth in relation to the occurrence of natural emissions :—

A young gentleman, in great alarm, consulted me respecting nocturnal emissions, under which he suffered. He brought with him some twenty or thirty prescriptions which had been given him at a cost of as many guineas by a surgeon, for the purpose, as he said, of stopping these emissions. It is unnecessary to give a detailed account of these prescriptions, but I may remark that I was both surprised and grieved to find amongst them several kinds of injections, consisting of caustic, zinc, sugar of lead, &c. Now, if the patient had laboured under Spermatorrhœa, or excessive and too frequent nocturnal emissions, I am sure that every well-informed surgeon will agree with me that the throwing up the urethra of these irritating injections, so far from diminishing the frequency of the emissions, could have no other effect than to increase them.

In this case I ascertained that on an average of some months the patient had not emissions more frequently than once in ten days, and consequently, as he was not in the habit of having sexual intercourse, he, in reality, was not labouring under any disease at all, involuntary seminal losses, at such intervals, and under such circumstances, being perfectly natural. This I at once explained to him, and assured him that he stood in no need of medical assistance. I regret to add that the surgeon here referred to had entirely neglected to inform the patient of the fact.

that all young men, on arriving at puberty, and not indulging in sexual intercourse, naturally have occasional nocturnal emissions, and, as I have already remarked, that their absence, and not their occasional occurrence, would be an indication of some defect in the generative system.

In March of the present year (1864) I was consulted by a gentleman suffering from nocturnal emissions. Upon inquiry I learnt that he was not in the habit of having sexual intercourse, and that the emissions in truth, during a period of six months, did not average more than once in ten days, and, consequently, they were not more frequent than what all young unmarried men, not indulging in sexual intercourse, are liable to have. When I told the patient this he expressed much surprise, as he had hitherto fancied that all involuntary emissions were the result of disease. He then further informed me that he had for more than a year been under the care of a surgeon with a view to obtain a cure of his imaginary malady. During this time various medicines had been prescribed, injections of different kinds used, caustic ones amongst them, and finally, bougies passed frequently, without, I need hardly add, stopping the emissions which had served for a pretext for all this cruel and absurd treatment. Ever since the patient had submitted to this treatment he had experienced a most inconveniently

frequent desire to pass his water, and he observed a considerable quantity of mucus was discharged with the urine. Now, during the whole of the time the patient was under this so-called treatment, not a word was said that could remove the erroneous impressions he laboured under as to the emissions being an indication of disease. Surely this should not have occurred? A patient who applies to a regular member of the profession, as the gentleman in question is, has a right to expect more candid and honourable treatment. Certainly he should not be thus played with. I regret to add, the surgeon here referred to is the one who also attended the patient in the preceding case.

When we hear of patients applying to some one of the pretended surgeons, physicians, anatomical museum keepers (a new dodge of the quacks to entrap the unwary), whose filthy advertisements are constantly to be seen in our newspapers, to the disgrace of our newspaper press, or whose still more disgusting hand-bills, containing a description of the contents of their museums, are thrust into our hands as we walk along the streets, we expect to find that these occasional nocturnal emissions are in every case represented by these parties as something very terrible. But as the surgeon in question is the author of a work on these diseases, and of some repute in the profession, it certainly reflects no credit on him

to find him thus trading on the ignorance and the fears of such inexperienced youths.

Now, concerning these nocturnal emissions, let it be understood, once for all, that notwithstanding the bad name they have acquired, and hence are regarded by patients with fear and trembling, they are in truth of no consequence when they do not occur on an average more than once in a week or ten days. Such being the case, it is certainly a strange thing to see how, not only inexperienced and weakly youths, but also great strong men of mature age, under this miserable delusion, are nearly frightened out of their lives, and certainly often out of their senses, by this terrible bugbear of nocturnal emissions.

When such patients come to me, as they constantly are coming, terribly frightened, because they have an occasional nocturnal emission, I just ask them these simple questions, viz.:—"Suppose you were married, would you not have sexual intercourse with your wife more often than once a week or once in ten days? And if you did, do you imagine that you would suffer from any ill consequence from the emissions thus occasioned? Then why should you suffer in any way from these occasional involuntary nocturnal emissions? The material loss of semen is no greater than that resulting from sexual intercourse, whilst the nervous excitement is not nearly so great; consequently, the involuntary loss can, at

any rate, not be more injurious than the voluntary one. But, in truth, neither the one kind of emission nor the other is of the slightest importance in an injurious sense." I am happy to say that, in most instances, when the matter is thus familiarly put before such patients, their groundless fears are at once removed.


With these remarks, I leave the patients I have placed in my first division, and now proceed to the consideration of the cases of those patients I have ranged in the second.

These patients, as I have already said, are really suffering, and they are right in attributing their ailments, in a great measure, to excessive seminal losses. Nevertheless, they are mostly wrong in this respect—viz., that, under the all-prevalent Spermatorrhoea delusion which exists at the present time, they erroneously attribute their real or imaginary maladies to present involuntary spermatic losses, instead of the voluntarily excited seminal discharges of an earlier period which they have experienced by the practice of self-pollution. Now this is a very grave error, and one in every way fraught with much mischief. In the first place, this belief that the distressing nervous and other symptoms under which they for the most part suffer are caused by existing involuntary and imperceptible losses of semen, on

urinating or on discharging the fæces, or on the mere occurrence of erection, or even a partial one, is of itself such an incessant source of mental anxiety and fear as to add greatly to the patient's sufferings, as well as to render his treatment and cure more difficult.

In the second place, this erroneous notion is one of the main inducements to patients to submit to the vicious treatment of cauterization and caustic injections. If, therefore, we can show that patients of this class, in a great majority of instances, do not suffer from Spermatorrhoeal losses—and that, even when they do, such losses are not the cause of the symptoms of deranged health under which they labour—we shall, not only by the instantaneous mental relief this knowledge will afford them, have made considerable progress towards their cure, but we shall also free them from the risk of falling victims either to the cauterizers or to the quacks; for whilst the former base their treatment on this theory, the latter equally make it the fulcrum of their system of terrorism and extortion.

Patients of this class are mostly, like those of the former, young men who have been, from early youth upwards, guilty of masturbation, in whose cases, either from a more excessive or a more prolonged indulgence in the practice of onanism, or from inherent weakness of constitution, the baneful habit



has produced a host of anomalous and distressing symptoms of deranged health, from which the former have happily escaped. Now as the vulnerability of the various organs of the body differs in different individuals—as the heart in one, the lungs or the stomach in another, the brain in a third, &c.—so we find, according to the existing predisposition, that the catalogue of evils resulting from onanism embraces, in different subjects, the greater part of the diseases which afflict the human body. But this is not all. The provocative of a sense which when excited, acts upon all the organs, and with which they all have a certain sympathy, taking place at a time when their mode of action and sensation—that is, their temperament—is forming, must render the constitution of the latter different from what it would have been if its development had taken place in tranquillity, and free from any such influence. It is, then, not merely the health that may suffer from the precocity of the generative organs, but also the constitution or temperament. He who would have reached the age of virility endowed with a strong constitution—and, perhaps, even with one of those constitutions which enable the body to resist successfully that crowd of evil influences which are constantly assailing us all—will be destined to live, thanks to onanism, in a state of susceptibility and impressibility, which will render him peculiarly vul-

nerable to all those influences. That vice, then, compromises both the present and the future—the present, by the diseases which it produces; the future, by those of which it lays the foundation. If the young man's life escapes, it will still be mortgaged with a heavy debt of evils, the interest on which he will have to pay for long years to come, and perhaps for life.*

Now of all the disorders which premature and excessive venereal indulgences are capable of producing, the first and most common is certainly, according to the results of my experience, derangement of the digestive organs. Hence, then, in addition to the material loss of semen, and the nervous exhaustion which results in an especial degree from masturbation, we have, in considering both the possible ill consequences and the symptoms which are occasioned by the practice of onanism, to take into the account the effects on the organism of the want of a proper and sufficient supply of nutrition. And this applies equally to all periods of life. For whilst in the youth a due supply of nutritive matter is essential to the proper growth and development of both the mental and physical powers, so also it is equally important to the full-grown man, in order to repair the wear and tear of his organism

* "Essay on Sexual Debility," added to the translation of Dr. Pickford's "True and False Spermatorrhoea."

which is incessantly occurring. If we compare the symptoms generally observed in severe cases of prolonged indigestion, we shall find they resemble, exactly or nearly so, those which are paraded, and, as I think, too exclusively assigned to the effects of Spermatorrhœa. The following account of the symptoms which result from disorders of the digestive organs is taken from Dr. Elliotson's "Practice of Physic;" and if the reader will compare them with those described by authors on Spermatorrhœa as resulting from that malady, he will find that they correspond in a remarkable degree.

"The bowels are generally irregular, and for the most part they are torpid, but sometimes they are relaxed. In other cases, you find an alternation of costiveness and relaxation, so that they are never right. The fæces, too, are frequently unhealthy. Frequently you observe them lumpy, but they are of various morbid degrees of consistence, and of various morbid colours, and frequently they are not of their usual smell. Sometimes there is a great want of bile, and sometimes there is even a degree of icterus. From the irritation of the stomach the urine usually becomes high-coloured; but at other times, especially when there is a great quantity of wind generated in the stomach itself, the urine becomes excessive in quantity, and pale, just as in asthma.

“ Other parts of the body, however, suffer as well
“ as the gastro-intestinal, or (as it used to be called)
“ the alimentary canal. There is frequent headache,
“ either general, or particularly in the forehead, and
“ very frequently it is confined to one part of the
“ forehead—to one brow. Sometimes it is intermit-
“ tent, and sometimes absolutely periodical. I have
“ no doubt, however, that occasionally this headache
“ does not arise from the state of the stomach ; for
“ disturbance of that organ may be produced by cold,
“ or vexation of mind ; and then, when it comes to
“ be very severe, it will make a person sick. On the
“ other hand, it arises every day from taking things
“ into the stomach which disagree with it. I for-
“ merly mentioned how hereditary this description of
“ headache is, how frequently we see it in fathers
“ and in children, how frequently it occurs in many
“ members of the same family. Sometimes it will
“ come on at *regular*, and sometimes at *irregular*
“ intervals, disappearing, perhaps, after a certain
“ number of years. It is so obstinate that I do not
“ recollect curing a case of it, though I have tried
“ everything that could be devised. Frequently, in
“ this disease, there is confusion of mind. Patients
“ cannot apply themselves as they did before. They
“ cannot read long, and I have known some obliged
“ to give up study altogether. Frequently there is
“ vertigo, heaviness of the head, and sleepiness ; but,

“on the other hand, when the stomach is most
“deranged, it is common for persons to lie awake;
“they find it impossible to go to sleep. There is
“frequently, too, a ringing in the ears, *tinnitus*
“*aurium* and specks appearing before the eyes,
“*muscæ volitantes*. There is frequently great sad-
“ness, great depression of spirits. Patients are very
“restless and fidgety, and sometimes their temper is
“very irregular, so that you must take care not to
“say many things which, at other times, you might
“say with impunity. Voltaire, you will recollect,
“gives special directions to those going to ask a
“favour of the Prime Minister. He tells you to
“ascertain whether he has had his bowels opened in
“the morning, so much does temper depend on the
“alimentary canal. He says you should always go
“to the *valet-de-chambre*, and ask if all has gone on
“regularly; and if you find that it has, then you
“may ask your favour. The heart also sympathises
“with the stomach. There is frequently palpitation
“in these cases, and sometimes an intermittent pulse.
“Frequently there is nightmare, or terrific dreams.
“A partial consciousness, and yet an inability to
“make a voluntary exertion, comes on during sleep;
“but when patients can make an effort, they imagine
“they get out of this condition. Incubus is a very
“common symptom. There is frequently, too, a
“sense of great debility, which is felt particularly at

"the pit of the stomach. You hear patients complain of this every day; they say they feel as if their inside were all gone to decay. Sometimes there is a tremor of the whole body. The skin likewise suffers; it is generally dry and cold, but sometimes it is hot."

Now I repeat, that from the results of my observations, I am of opinion that the symptoms of deranged health and nervousness which this class of patients present, are due rather to the exhausting effects of the anterior excessive seminal discharges, than to any nocturnal or diurnal ones which may exist at the time of their seeking our professional aid. And in this view I am confirmed by the fact, that in the cases of patients who have indulged in onanism, but who nevertheless are not troubled with either excessive nocturnal or with diurnal seminal losses, I find exactly the same amount of deranged health and nervousness as I do in those who have practised self-abuse to the same extent, and who have besides both nocturnal and diurnal discharges, of semen. It is therefore clear to my mind that the state of health which these patients exhibit is entirely independent of and uninfluenced by the existence or non-existence of such seminal discharges. The utmost importance which can be attached to their presence is that which may be due to the indication they afford of the existence of a certain amount of local erethism and

irritation; and this applies in an especial degree to the diurnal discharges. For if we reflect on the probable amount of semen which is discharged in these cases of diurnal Spermatorrhœa, and compare it with the quantity emitted in sexual intercourse by a healthy man, or even by such patients of this class as can indulge in connection, we shall find that the loss by these diurnal discharges bears no comparison to that sustained with impunity in sexual congress. On this head Dr. Pickford justly remarks :—

“All the morbid sensations of a patient affected with involuntary seminal emissions are regarded as consequences of this affection. Such a supposition, however, is radically false.

“Donné has remarked that in a patient whom he examined the loss of semen is so trifling as to be quite insufficient to account for the very serious symptoms with which the patient was affected. He therefore does not regard the observed loss of semen as the cause of the malady, but gives no opinion respecting the relation of this single symptom to the general malady. The patient suffered, moreover, from general constitutional derangement, from which, added to the fact, that his urine was turbid, thickish, overloaded with sediment, both organic and inorganic, and quickly putrefied, Lallemand would, without further examination, have inferred the existence of Spermatorrhœa. Donné has rightly

“ maintained that the characters of seminiferous urine, as given by Lallemand, are altogether false ; such urine, in fact, exhibits no characteristic appearances by which it can be recognised with any degree of certainty.

“ Donné found that his patient's urine contained semen only on those days which had been preceded by nocturnal emissions—viz., three times in eighteen or twenty days. The loss of semen could not, therefore, be the cause of the malady. Neither were excessive seminal losses detected in a patient who suspected their existence, in consequence of lameness in the lower extremities, relaxation of the genital organs, &c. The fourth and fifth of Donné's six cases are by no means conclusive. One of these patients was forty years old, had previously suffered from nothing but disordered digestion, was apparently vigorous (it was afterwards observed that he had suffered from a slight degree of weakness). The other was a man of thirty-two, full of life and spirit, without lameness or weakness, but had noticed for some time a remarkable falling off in his power of recollecting names and numbers. In the viscous, turbid fluid discharged from the urethra on going to stool, seminal animalcules were found in large quantity; nothing, however, was said of any examination of the other symptoms of the patient. These, however, are not the characteristics of patients who really

“suffer from diurnal pollutions. The sixth patient
“is a young surgeon, who details his symptoms in a
“much more intelligent manner than hypochondriacs
“of this class generally do ; nothing, however, is said
“of the grounds on which the diagnosis of Sperma-
“torrhœa was based. There remains, therefore, only
“the first case related by Donn  . In this case serious
“constitutional disturbances, and very grave nervous
“symptoms, led to the suspicion of Spermatorrhœa,
“and the existence of this was undoubtedly proved :
“the urine contained daily a considerable quantity of
“semen.

“Generally, however, even in those patients who
“really have frequent seminal emissions, the quan-
“tity discharged each time is very trifling. It is
“rare that emissions take place at every evacuation
“of the f  ces ; hence the rule given by the French
“physicians, to build the diagnosis only on repeated
“examination. We then find, generally, not in all
“but only in some of the last drops of urine, which
“are evacuated in straining to expel the f  ces, a
“larger or smaller quantity of spermatozoa. If we
“estimate the quantity of semen thus discharged at
“one or two drops on the average, the estimate will
“not be too small. Supposing, then, that a patient
“of this description loses one drop of semen in a day,
“this in a whole month will scarcely amount to so
“much as one single pollution, the quantity of which

“is known to be about one or two drachms. More-
“over, the universal and always exhausting nervous
“excitement which follows coition is always absent.
“And yet this trifling loss of semen is said to pro-
“duce such fearful consequences, and the pollutions
“of the patient to be completely prevented by it!

“A physician would certainly be justified in
“hazarding a few modest doubts respecting the
“utility of local treatment in such cases, or indeed in
“declaring himself unable to see any justification for
“so violent a mode of treatment as the cauterization
“of the surface of the prostate gland with lunar
“caustic; or lastly, in being rather sceptical about
“the magical cures of such patients by one or two
“applications of the caustic.

“Doubts as to whether seminal losses, which are
“always inconsiderable, can be the cause of serious
“derangement of the nervous system, have been
“already put forward by medical writers. Eisen-
“mann, in his remarks on Kaula's work (p. 76)
“makes the following observations on this point:—
“‘The amount of semen lost in these involuntary
“‘discharges is quite inconsiderable; the total quan-
“‘tity which escapes during several days in the
“‘diurnal pollutions following the evacuation of
“‘urine and fæces is less than that which is at once
“‘discharged in a single act of coition. How, then,
“‘can so trifling a loss of semen produce such fearful

“consequences, when other men, or even the same
“man, before he was thus affected, have suffered
“much more copious voluntary emissions in sleep-
“ing with a female, without experiencing the
“slightest ill consequences therefrom? The semen
“once deposited in the vesiculæ seminales is destined
“for evacuation, and nothing can be more fallacious
“than to suppose that the re-absorption of this
“semen into the organism can do any good, or pro-
“duce any increase of bodily strength and spirit.
“Nothing but an excitation, physical or moral, of
“the sexual organs, by which the testicles are sti-
“mulated to a more abundant secretion than the
“constitution is able to bear, can do any injury to
“the organism; but this excitement is altogether
“absent in Spermatorrhœa, for otherwise such pa-
“tients would scarcely experience a diminution of
“their nightly emissions in addition to the so-called
“diurnal pollutions. Finally, how can we talk of
“weakness from exhausting seminal emissions in
“such patients, at least in the first stage of their
“malady, when there are no diurnal emissions, and
“the nightly emissions are but moderately frequent,
“while the patient's aspect is perfectly good, his
“body well nourished and even vigorous, and the
“muscular power perfect, and nevertheless he suffers
“from excessive irritability, or from hypochondria
“and derangement of the perceptive powers? (See

“the cases mentioned by Remak, at p. 149 of his
“‘Diagnostic Investigations.’)

“Remak’s observations on Spermatorrhœa (made
“on forty-five patients) partly relate to too frequent
“nocturnal emissions, partly to seminal losses in the
“evacuation of urine and fæces, which latter cases,
“according to Remak, are much more frequent than
“the former. It is, in fact, remarkable, that in the
“cases adduced, the influence of these losses on the
“constitution was so small. The first patient was a
“journeyman butcher, of strong build and dark complexion, who complained of impotence and of weariness, which came over him in his laborious occupation. The third patient, an officer, thirty-two years old, is impotent and grows weary on the slightest exertion; after one cauterization, however, he has a nocturnal emission, and is able to take walks several miles long. The fourth, a student of twenty, has been long treated in vain for a fixed tormenting pain in the head, near the crown, which destroys all his mental activity; in spite, however, of his Spermatorrhœa, he is in a condition, immediately after his arrival in Berlin, to contract a gonorrhœa by sleeping with a woman.

“These cases strongly tend to confirm the opinion
“of Eisemann, that the seminal emissions are not
“the cause of the sufferings of these patients.

“Valentine * is also of opinion that both patients
“and physicians take these seminal losses too much
“to heart. ‘They think,’ says he, ‘that the too fre-
“quent loss of so precious a fluid must in a short
“time destroy life. Experience shows the contrary.
“Involuntary seminal emissions may continue for
“years without the patient dying or even being
“affected with *tabes dorsalis*, provided that he dis-
“continues the practice of onanism, and does not
“give way to other sexual excesses. If a man is
“wearied by the ordinary healthy evacuation of
“semen, the cause of such weariness must be sought
“in the accompanying nervous excitement. If this
“excitement is absent, the semen escapes without
“any ill effects.’

“This statement probably, however, goes too far,
“True, Spermatorrhœa has certainly a very bad effect
“upon the organism; and in nocturnal emissions, as
“well as in too frequent sexual intercourse, there is
“not only the nervous excitement, but also the mate-
“rial loss to be taken into account. This is shown
“in cases of too frequent pollution from purely local
“causes, such as those mentioned by Pauli. I ques-
“tion, however, with this writer, the frequency of
“this malady, and more particularly of true diurnal
“pollutions, in spite of the opposite statements of
“Lallemand, Kaula, and Eisemann.”

* “Treatise on Human Physiology,” vol. ii., part 3, p. 22.

I feel that if the reader is not convinced by the above quotations, from such eminent authorities on the subject, it will be useless for me to add any additional remarks of my own. I shall, therefore, content myself with merely saying that the results of my own experience and observation entirely confirm their correctness.

With regard to the treatment of this class of patients, if the more prominent symptoms point to derangement of the organs of digestion, the treatment must be carried out on the same general principles which regulate the treatment of this malady when resulting from other causes. If the nervous system is greatly affected, and the patients are hypochondriacal, they must be treated as ordinary hypochondriacs. In fine, the treatment must be directed with a view to the removal of any special disorder which may be more prominently developed, and the improvement of the powers of the nervous system and the general organism. At the same time, should there be any indication of acute or chronic inflammatory action or undue sensibility and irritability of the bladder, or of any portion of the genito-urinary organs, as frequently happens, they should be treated on the same principles as would regulate their treatment when arising from any other cause.

I now arrive at the consideration of the cases of

those patients who are beyond all doubt suffering under true Spermatorrhœa.

I would in the first place remark that this class of sufferers may be divided into two kinds—viz., into those in whom the disease has originated from the practice of onanism in youth, and those in whom it is due to sexual excesses indulged in at a later period of life. Now, in regard to the former description of patients, we find them for the most part labouring under a similar group of symptoms to those which I have described as resulting from the practice of onanism in the cases of imaginary sufferers under Spermatorrhœa. As in those cases, so in these, the patients are mostly young men who have been early initiated into the practice of self-abuse, and they come to us complaining not merely of a want of sexual passions, or the loss of copulative powers, nocturnal and diurnal seminal discharges, but also of various and anomalous symptoms of derangement, both mental and physical. The following description may be taken as a general type of symptoms presented by this class of patients. They are almost always young men, frequently of a pale sallow complexion, and sickly appearance; nervous and very timid in their manners, speaking sometimes with great hesitation, and at others in a hurried manner. They complain of a want of memory, a want of power to apply themselves to the study of any important or

even ordinary matters. Dislike to society, variable spirits, palpitation of the heart, produced on the slightest exertion, or even, sometimes, from merely having to speak to a stranger. The bowels are irregular, appetite uncertain, at times eating voraciously, at others loathing even the sight of food. Headaches, imperfect vision, cramps in the legs, inability to sleep, too great a disposition to sleep, and in short, a whole host of variable and contradictory symptoms.

With regard to their sexual functions, they for the most part believe themselves impotent, and consequently refrain from all attempts at connection. Some, however, make occasional attempts, and then they complain of non- or imperfect erections, premature emissions, unaccompanied by any feelings of pleasurable excitement on the occurrence of this crisis, the cessation of the erection before emissions. They further very often complain that at the time of making these attempts, they are seized with palpitations of the heart, accompanied by such a general feeling of nervousness, depression, and alarm, as to utterly destroy their sexual desires, and thus make them only wish to escape at once from their female companion.

Now, I am convinced that, although these patients suffer more or less from too frequent nocturnal or excessive diurnal involuntary seminal discharges, yet

as in the cases of the imaginary victims of Spermatorrhœa, the preceding symptoms are due in a much greater degree to the premature and excessive seminal losses which the patients have sustained by self-abuse, and the consequent injurious influence thereby excited on the proper nutrition, growth, and healthful development of the youthful organism, than to any injurious consequences which are resulting through the existing nocturnal or diurnal seminal emissions. These losses, I repeat, do not—nay, could not, *per se*—occasion the symptoms referred to. They may, however, and doubtless do, aggravate the local debility and derangement existing in the generative system; whilst at the same time their presence is certainly an indication of the existence of a considerable amount of local disturbance, which cannot fail to make the patient's treatment and cure more difficult and tedious.

I am confirmed as to the correctness of these views, by finding that, in the cases of those patients who are suffering under nocturnal or diurnal Spermatorrhœa, produced by excessive sexual intercourse, indulged in at a later period of life, that is, after the full growth and development of the body has been accomplished, these trains of symptoms are for the most part wanting. It is, indeed, astonishing to what extent excessive sexual intercourse can be indulged in with impunity after the full development

of the organism has been effected, especially if there has been no antecedent self-abuse, or excessive sexual indulgences. And even when ill consequences do follow, these effects show themselves more in functional derangements of the generative system than in the general health. Thus the complaints of patients of this class refer for the most part to local symptoms of derangement, rather than to general or constitutional disturbances. They complain of a want of desire for connection, non- or imperfect erections, premature or too tardy emissions, and the absence of any pleasurable excitement on the occurrence of the seminal emissions, whilst they will at the same time tell us, that, in regard to their general health and bodily strength, they were never better in their lives.

I have at this time a gentleman under my care, whose case corroborates these views. Some five years since this patient formed a connection with a lady with whom he was desperately enamoured. His passion occasioned most excessive sexual excitement, and under this influence sexual intercourse was indulged in for a considerable period beyond all rational bounds. Ultimately circumstances separated the parties, and some months after, the patient, in sexual intercourse, found the erections less perfect, and the emissions excessively premature. He likewise remarked that on going to the water-closet, there almost always occurred a profuse slimy discharge.

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These symptoms had existed for more than three years before my seeing the patient. On making an examination of the discharge I found it to be seminal. The patient informed me that in regard to his general health, it was in no degree impaired. I should state he had been cauterized by an eminent hospital surgeon, without deriving the slightest benefit therefrom. At this time he did not place himself under my care for treatment, but merely had my opinion on his case; but three months since, finding all the symptoms continue, he determined on requesting me to attend him.

The result of the treatment up to the present time has been to stop almost entirely the seminal discharges at the water-closet (not more than four having occurred all the time he has been under my care), and the erections are stronger and the emissions less premature; under these favourable circumstances, we are in great hopes of an ultimate and complete cure being effected. I avail myself of the opportunity afforded by the publication of the present edition to state that this patient was ultimately cured, and has since married.

I might relate a great many other cases (some now under my treatment), all showing that when the spermatorrhoeal discharges are produced at a comparatively late period of life by excessive sexual intercourse, the patients do not exhibit the same

extent of general and nervous derangement as those who owe their condition to sexual abuses practised anterior to the period of puberty. Indeed, it may be regarded as an indisputable axiom, that the period of life in which the venereal act (in excess) is, *cæteris paribus*, the least injurious, is that which commences when the general organisation is completed and has reached its state of perfection ; and we may add to this, that venereal enjoyments dating prior to this period, are, *cæteris paribus*, the more injurious the more distant they are in point of time from that age.

With respect to the treatment of these cases, it is absolutely impossible to lay down any exact rules ; for the symptoms are so variable, and the patient's condition, both moral and physical, often so peculiar and exceptional that each case must be treated, so to say, on its own merits.

I need hardly remark, that in the case of young men suffering more or less under the general symptoms above described, arising as those symptoms do from causes entirely independent of the existing Spermatorrhœa, the treatment must be based on such general principles as would regulate the treatment of any other patients labouring under the same group of symptoms, if occasioned, as they might be, by other causes than onanism or sexual excesses. When through the administration of proper remedies, both

the moral and physical tone of the patient have been restored, or are improving under treatment, attention may be directed to the condition of his generative organs. Thus if there be symptoms of undue sensibility and irritability in those organs or portions of them, such remedies should be prescribed as would be ordered if a similar condition of the parts were produced by any other cause than onanism or venereal excesses, as, for example, from the transmission of gonorrhoeal inflammation from the anterior to the posterior portions of the urinary canal. When the undue sensibility or irritability has been subdued, remedies calculated to impart tone and vigour to the generative system should be prescribed, care, however, being taken not to commence too early with this class of remedies. I am satisfied that the failure of tonics to afford relief, arises in most cases from their premature and too indiscriminate administration.

There can be no doubt that both onanism and excessive sexual indulgences have a great tendency to create a species of erethism or irritability of the neck of the bladder and the prostatic portion of the urethra. In some cases the irritation is of an acute, in others of a chronic character. In the former case opiates and emollient remedies must be given, and even in the latter they may be also frequently prescribed with benefit at the commencement of the treatment. With regard to local treatment, the

occasional introduction of a simple or medicated bougie, as used in cases of irritable urethra produced from other causes, is frequently of great benefit to the patient, as shown at page 43, in the case of the patient from India. I believe that the simple or medicated bougie properly employed, is capable of producing all the beneficial effects which the advocates of the solid caustic and caustic injection treatment claim for those preparations without at the same time exposing the patient to the same suffering and risks which invariably attend their employment.

When by these means any existing local irritability is removed, or at all events lessened, a judicious course of tonic treatment will very generally complete the patient's cure. But here I must again observe, that, useful as tonics are in many cases, their importance in the treatment of patients of this class is frequently exaggerated, and even their administration abused; for there is no doubt that cases are constantly met with in which such remedies are injurious, inasmuch as seminal emissions do not by any means always depend on atony, weakness, or relaxation of the sexual economy, but, on the contrary, result from an over-excitement of the generative system, requiring therefore remedies of a totally opposite nature. Hence, in order that tonics may really produce the good effects expected from them, we must know well how to distinguish the cases to

which they are applicable, and seize upon the particular stage of the disease in which the use of them is called for. When used without this discrimination, they will as often prove injurious as beneficial.

In cases of Spermatorrhœa in older men, resulting from sexual excesses, the treatment may in most instances, from the absence, as I have stated, of any symptoms of general constitutional derangement, be at once directed to the organs specially affected. And the same principles of local and general treatment which I have recommended in the preceding cases, after the renewal of the general derangement, are equally applicable to the cure of this class of patients.

In short, our object must be, on the one hand, to allay the morbid excitability and irritability of the generative system, and on the other to restore the organs to a vigorous tone.

I have only to add, that during the last forty-nine years I have treated many thousands of these cases on the general principles indicated, and the average results have been such as to afford every satisfaction both to myself and to my patients ; whilst even in those cases in which a cure has not been accomplished, I and my patients have at all events had this consolation under the failure, namely, that the means and treatment adopted, if they have failed, have at any rate not added greater sufferings and

more serious maladies to the original disorder; and this, I take it, is more than those who practice and those who submit to the treatment of cauterization or caustic injections can in many instances with truth declare.

If the opinions expressed in the preceding pages are correct, as I believe them to be, it is clear—

First.—That all healthy young men not indulging in regular sexual intercourse are liable to have occasional nocturnal emissions. And that so far from such emissions being an indication of the existence of any disease in the generative system, on the contrary, the non-occurrence of such emissions would be a sign of the presence of some inherent or acquired defect in those organs. Hence, the main question to determine in relation to the occurrence of nocturnal emission in men not indulging in regular connection, is the extent to which they may occur without themselves proving injurious to the general health or the vigour of the generative organs, or without being regarded as evidence of the existence of some defect in those organs.

Now, the constitutions and the powers of men are so various, that it is impossible to fix on any given period as that within or beyond which involuntary nocturnal emissions are, on the one hand, not hurtful, or, on the other hand, are in themselves injurious or symptomatic of the existence of some derangement

in the generative economy. One man will bear with impunity weekly losses of this kind, whilst another will be utterly prostrated by one or two emissions occurring within a month.

Consequently, in order to form an opinion as to when these emissions are or are not injurious in themselves, or indicative of generative derangements, we must judge each case *per se*, and by noting the symptoms which accompany them, and the effects which result from them, we shall very readily arrive at a correct conclusion on these points. Thus, if the emissions are preceded and accompanied by powerful erections, and with vivid dream-pictures of the whole process of sexual intercourse, and such great pleasurable excitement on their occurrence as to awaken the patient, while the semen discharged is thick and gelatinous and strongly impregnated with its characteristic odour, we may be sure that such involuntary emissions are in no wise injurious; the more especially if the patient the next day feels light and joyous, as healthy and vigorous men do after sexual intercourse.

This description may be taken as the standard from whence to measure the importance to be attached to the occurrence of involuntary nocturnal emissions. Thus, if they take place when the erections are only slight, and the dream-pictures less vivid, the pleasurable sensations but little and at the

same time, the semen emitted is thin and watery, and the patient next morning feels depressed and generally ill, we may be sure that such emissions are not only in themselves injurious, but afford conclusive evidence of the existence of grave defects in the generative organs. Further, when the involuntary emissions occur without erection, without dream-pictures, without sensation, and without consciousness on the part of the patient, they must be regarded as of a still more serious nature, and in such cases, if the patient is not already affected with impotence, he has every prospect of soon becoming one of that unfortunate class.

Secondly.—Notwithstanding what is said above as to the importance to be attached, under certain circumstances, to nocturnal and diurnal emissions, yet it is questionable whether involuntary seminal discharges, both nocturnal and diurnal, may not, and in fact do not, happen at all periods of life to men who, notwithstanding, are in the enjoyment of perfect general health and sexual power, and, consequently, that the mere occasional occurrence of such losses afford, *per se*, no grounds for regarding them as indicative of the existence of any serious lesions in the generative system.

Thirdly.—That although it is the universal practice of the unprincipled men I have referred to, to represent to every patient applying to them for the

cure of any form of sexual debility or impotence, that their maladies are due to Spermatorrhœa (no matter whether or not the patients are really subject to involuntary nocturnal or diurnal emissions) yet it is more than doubtful, even when the patients are really suffering under involuntary nocturnal and diurnal seminal losses, whether such losses should not rather be regarded as one of the symptoms of the debility or impotence under which the patients labour, than the cause.

On this head I would state, that for some years past I have made most minute and careful observations in the cases of many thousand patients suffering under every form and extent of Generative Debility, from slight functional derangements to complete impotence, and the result has been to satisfy me, that these losses are rather to be regarded as the symptoms of the different degrees of debility under which the patients suffered, than the cause; inasmuch as during this careful and continuous watching of the patients for months, and examination of the urine voided, the discharges occurring at stool, and on complete or partial erections, I have found the quantity of semen thus lost so small, and only then at such prolonged intervals, as would render it perfectly absurd to suppose them capable of producing the extreme debility under which the patients have laboured. Consequently, to attribute

as is now the fashion (for there is, unfortunately, as much fashion now-a-days in physics as in dress), all cases of sexual debility and incapacity to such limited spermatic losses, is both a professional fallacy and a popular delusion.

Fourthly.—In some rare and exceptional cases, both nocturnal and diurnal involuntary losses of semen do occur with such frequency and in such quantities, as to place it beyond doubt that they are the main cause of the debility or impotence under which the patients suffer. But such cases form the exception, not the rule.

Fifthly.—That in a great majority of cases where patients have been found guilty of self-abuse in early youth, and subsequently labour under involuntary nocturnal and diurnal emissions, as well as different varieties and degrees of sexual debility and even impotence, with more or less derangement of the general health, it is an error to attribute their condition to the existing seminal losses rather than to the antecedent losses and excesses. And the same remark applies to the like conditions following on venereal excesses with women, at all periods of life.

In conclusion, I would say to any one who may chance to read this little book, amongst the thousands of inexperienced youths who are now suffering under fearful mental despondency, in consequence of having fallen in with some of the vile books published by

the quacks, do not allow yourselves to be frightened by the exaggerated representations contained in them respecting the ill consequences resulting from your youthful indiscretions, and still less, if you value your future health and happiness, consult such men.

SUPPLEMENT TO THE TWELFTH EDITION.

IN the previous Editions of this *brochure*, as in this, I have felt it my duty to have the courage of my opinions, and to express, in no equivocal terms, my firm conviction that, in many instances of patients suffering under real, or even imaginary impotency, it is essential that the medical attendant, in the immediate interests, as well as in the future happiness of his patient, should cast aside all prudery and advise them to test and exercise the sexual powers (if any doubts exist as to their capacity) before venturing on marriage, or before dooming themselves to a life of miserable celibacy. If this were the rule, how many years of, to both parties, tantalising and wretched married life would be, in the one instance avoided, and in the other, instead of the patient giving himself up to remorse and gloomy despair, and even in the future becoming a confirmed onanist, and, perchance, a suicide, his life might be spent in the joys of a husband and father !

The following is the history of a case in which I had recently the pleasure of saving a patient from probably falling into such a condition :—

This gentleman came up to London for the express

purpose of consulting me, about the commencement of November in this year (1881). He informed me that in early youth he had been initiated into the sad habit of onanism, which he had continued for many years without the slightest notion that he was injuring himself or doing anything very wrong. About two years before his calling on me his notice had been drawn to a book published by one of the most notorious quacks who infest the Midland Counties. He purchased and read the horrible pamphlet, and, as the natural result, became dreadfully alarmed as to his probable condition. Under these feelings he consulted the quack. Of course, the fellow, after the fashion of his fraternity, said everything he possibly could to increase the poor patient's fears, and the result was, he placed himself under the care of the impostor. He remained under the so-called treatment of this man for more than a year at an expense of some hundred and twenty pounds. During this period he made several attempts to have sexual intercourse without success. Happening to see an advertisement of the "Revelations of Quacks," he obtained it, and seeing the name of the man in the list of provincial quacks which it contains, he at once decided to have nothing more to do with him. Hence, his visit to me. I found he was in a nervously excited condition, full of exaggerated fears as to his melancholy state, and his future prospects. Having carefully examined into his physical

condition, and closely questioned him as to his attempts at intercourse and failures in them, I came to the conclusion that in truth there was nothing the matter with him. On my telling him this he would not believe me, and begged me to take him as a patient and commence his treatment without delay. He was the more anxious that I should do so as he was much attached to a young lady, but did not dare to propose to her. I repeated my opinion, but, finding that nothing I could say would remove his fears, I advised him to seek another opportunity of testing his powers before placing himself under treatment. With much hesitation and fear as to the result, he promised to follow my advice. I gave him some hints as to the regulation of the attempts. Three days afterwards he called upon me, his face radiant with delight. He had followed my instructions, and been perfectly successful. I now desired him to make no more such attempts, but to go home, propose to the young lady, and get married as soon as possible. This he promised faithfully to do. Persons with little experience in the management of such cases, and the slave of the prudery I have referred to, would, in all probability, have contented themselves with giving the same opinion as myself, without the subsequent advice, and thought they had done their duty to the patient. Well, perhaps they would have, but of this I am sure, from my experience, the patient would not have believed a word.

they told him, and he would have remained a miserable wretch for the rest of his life, seeking in vain, first from one quack, and then from another, the desired relief. At all events, I hope the moral wrong I did, (if I did any), will be condoned in consideration of the inexpressible happiness I conferred on my patient, and have, in the course of my long years' (forty-nine) practice, conferred on thousands in a similar painful predicament.

I would here pause to state that, although I may feel bound in the interests of my patients to advise them to test their powers, I never fail, when once their powers are restored, to impress on them the advisability of refraining from all promiscuous intercourse, not only pointing out to them how ungrateful such conduct would be for their restoration to manhood, but also the fearful physical dangers to which they expose themselves by such conduct, and I am happy to say that, with few exceptions, I very soon hear from them that they are happily married.

The following cases, which I have selected out of some hundreds of a similar character, I have treated since the publication of the last Edition, will show the advantages, in real cases of impotency, of a combination of special medical treatment, and the occasional testing of the sexual powers:—

A gentleman called on me about the end of February, 1879, when he informed me that he was im-

potent. He attributed his condition to his having been taught in early youth the baneful habit of onanism. His general health was fairly good. But he had on various occasions made attempts at sexual intercourse and utterly failed in his object. This was a source of great misery to him, as he was deeply attached to a young lady whom he desired to marry, who reciprocated his affections. He further informed me that whilst two or three years before my seeing him he had occasional erections (feeble) and a certain amount of desire, of late years he scarcely ever had any erections, and all desire had ceased. Finding that his general health was unusually good, and that, apart from the local weakness, he was a strong and hale man, I expressed an opinion that, under proper treatment and management, he might be cured of the local incapacity. But I added it might be many months before this result would be obtained. He replied he did not care how long it was before his cure was accomplished so long as it was ultimately effected, and if I would undertake the treatment he would not give in as long as I entertained a hope of a successful issue. The treatment was commenced on the 1st of March, 1879. For many months the progress of the case was most unsatisfactory. He tested his powers with no better result than before the commencement of the treatment. Writing to me early in January, 1880, he

said :—" My health continues very good, never better, " but still I have no desire for connexion. Consi- " dering the time I have been under treatment, I am " rather surprised at this, and I am getting very " down-hearted about it. I should like you to see me " and have your candid opinion about my state, and " I intend coming up to town shortly for that pur- " pose whenever it would be convenient to you, as I " am truly anxious to get well if possible." At our interview I confessed that the case was a most obsti- nate one, and that I was equally disappointed as himself. Nevertheless, unpromising as it appeared, I did not give up all hope of a successful result if he would still follow my advice. This he expressed his desire to do. And most fortunately for him was this resolve, for writing to me towards the end of Feb- ruary, he said :—" I think the pills you sent me have " done me some good, for I certainly feel much better " than I did. I have erections at night after going " to bed, and in the morning, which I take to be an " improvement." He wrote me on the 5th of March, " 1881 :—

" MY DEAR SIR,—I was away from home yesterday, " or I would have replied to your letter sooner. I " can't tell you how pleased I am to hear you say I " may soon be in a condition to marry, that is of " course if I continue to follow your advice, which " you may depend I shall only be too glad to do.

" Really I am quite overjoyed at such good news. " I feel lighthearted and happy, and in better spirits " than I ever remember before."

It would be tedious to refer to all the letters which passed between us during the prolonged treatment. The more prolonged than anyone I ever treated in my life. We had many ups and downs, but he gradually improved, as will be seen from the following letter, dated 3rd of May, 1881—

" MY DEAR SIR,—I am in receipt of your letter of " yesterday. I am extremely sorry to hear of your " illness and trouble. I never for a moment thought " you were neglecting me, and beg to thank you very " much for your kindness and attention to me. I am " feeling very well, never better, my stomach in good " order, bowels moved regularly, but not relaxed ; " tongue clean. I am glad to be able to tell you " that I have proposed to my lady love and been " accepted ; the wedding will be about the end of " July. In the meantime I shall rely on you to do " the best you can for me."

In a letter received from him in June he writes, " I am glad to be able to state that I consider my " case is making satisfactory progress. The generative " organs are much improved in appearance and tone " since I last wrote. General health continues good " as usual."

On the 1st of July he wrote—" I feel well and am

“ looking forward with pleasure and confidence to
“ my wedding-day, which is as you know close at
“ hand.” In the next letter I received from him he
wrote, “ I was married last week, and thanks to
“ your skilful treatment was able to perform the
“ husband’s part satisfactorily.” “ So I feel
“ confident you have at last succeeded in making a
“ man of me ; in fact if I keep going on like this you
“ will stand a good chance of winning the bet, (this
“ has reference to some joking which had taken
“ place as to his wife having a child) I cannot tell
“ you how glad I am to get well, or how to express
“ my thanks to you for all the kindness and attention
“ I have received.”

The last letter I received from this patient was dated August the 8th, 1881, he wrote.—

“ MY DEAR SIR,—I am glad to tell you that I
“ am going on very well. I should not like to
“ have anything like a relapse, so I shall again
“ be glad of your opinion. I feel myself to be
“ gaining rather than losing power every day. In
“ fact, married life agrees with me very well.”

I have selected these two cases as typical of my views in relation to the treatment and general management of those who are real sufferers under some form of sexual incapacity, and of those who are only imaginary sufferers. I might adduce hundreds

of similar cases in confirmation of my views, but I feel to do so would be as tedious to my readers as the repetition of a thrice told tale.

In conclusion, I have only to remark that I desire to urge these cases and results on the especial attention of those of my professional *confrères* who refrain in such cases from recommending those who consult them to test their powers before assuming they are impotent, or commencing any treatment for, it may be, an imaginary malady. When there is no doubt as to the patient's incapacity it is equally necessary for him to try his powers that it may not only be ascertained what progress he is making, but also that the question as to marriage or not be decided. To my sporting medical friends and patients I put the matter in this familiar way. If you had a racer and wanted him to win a race you would not put him in a loose box, give him lots of corn (tonics), and never exercise him? Assuredly if you did he would win no race. *Verbum Sapiente Sat*

Just as the preceding sheets are leaving the printers I have received the following letter from the patient whose case is related at page 131.

When I see the happiness it has been my good fortune to confer on him, and contrast it with his miserable mental and physical condition when he first consulted me, I am truly thankful that no false prudery on my part prevented me from recommending him to test his powers from time to time during his treatment, as I feel assured if I had I should never have received such a gratifying letter from him :—

“ Dec. 22, 1881.

“ MY DEAR MR. COURTENAY,—Many thanks for
“ your kind letter and the good wishes it contains,
“ indeed I feel as if any words of mine would
“ utterly fail to convey the feeling of heartfelt grati-
“ tude I have towards you for the many kindnesses
“ I have received at your hands. By your skill,
“ attention, and many kindly words of encourage-
“ ment, which will be remembered for life, I am now
“ one of the happiest of men, and I thank you from
“ the bottom of my heart. Accept my sincere sym-
“ pathy in your bereavement, and my best wishes
“ that you may enjoy better and long continued
“ health, for I am truly sorry to hear you have been
“ so unwell.

" I have always regretted not calling to see you
" when I had the opportunity of doing so when I
" was up in town, but I still hope and trust to see
" and shake you by the hand some day. I have a
" very happy and comfortable home in the country,
" a good and prosperous business, and, above all, a
" loving and devoted wife who, you will be pleased
" to hear, is about four months gone in the family
" way, which speaks for itself of your success in
" completely restoring me to manly power.

.
" Yours very faithfully,

" _____."

Just Published, price 1s. 6d. ; by post, free, 1s. 8d.

REVELATIONS OF QUACKS AND QUACKERY:

A SERIES OF LETTERS BY "DETECTOR."

REPRINTED FROM

"THE MEDICAL CIRCULAR,"

BY THEIR AUTHOR,

F. B. COURTENAY,

MEMBER OF THE ROYAL COLLEGE OF SURGEONS OF ENGLAND, AND FORMERLY
SURGEON TO THE METROPOLITAN INFIRMARY FOR THE CURE OF
STRICTURE OF THE URETHRA.

EIGHTH EDITION: WITH ADDENDA.

CONTAINING ADDITIONAL

FACTS AND CASES

IN FURTHER ILLUSTRATION OF

THE NEFARIOUS PRACTICES OF THE
ADVERTISING QUACKS.

LONDON: BAILLIÈRE, TINDALL, AND COX,
20 KING WILLIAM STREET, LONDON, W.C.

OPINIONS OF THE PRESS.

QUACKS AND QUACKERY

[*From the SATURDAY REVIEW, April 1, 1865.*]

THE recent trial and conviction of the fellow calling himself Dr. Henery has, and very properly, compelled public attention to one of our social evils. The subject is a most disgusting and offensive one ; but as we have hardly arrived at that last stage of national or moral decrepitude in which, as in old Rome, people can endure neither the vices of the people nor their remedies, we make no apologies for venturing again on Quacks and Quackery. Besides, we have, in the very able and, in more senses than one, exhaustive publication of certain letters signed "Detector," and published in the "Medical Circular," a proof that something can be done to arrest the career of the impostors and extortioners whose existence and depredation on the public are not only a disgrace to society, but a reproach to our laws, or at any rate, on our law-makers. "Detector" is a medical practitioner, and he says, very reasonably, that interested motives might be assigned for his speaking out. But he appeals to others to whom no such personal reasons could be objected. He asks the clergy to help him in what he calls the "*guerre d'outrance* against the whole tribe of obscure quacks." But sermons on dirty advertisements and the medical museums can hardly be expected ; and a morning call and pastoral visits on the stupid folly of buying "Silent Friends," and consulting the scoundrels whose calling is proclaimed in too many of the London papers, are not likely to be numerous, so that on the press falls the unpleasant labour of denouncing

this rampant evil. We are content to accept our share in what we believe to be a good work. Sir George Grey, and the like of Sir George Grey, and even the better sort of Parliament men, will not move—perhaps cannot be expected to move—unless backed, or rather urged by the stress of public opinion. The duty, therefore, of exposing quacks rests somewhere; and as it is part of the burden which falls upon those who undertake the office of public instructors to have unpleasant things to say, our readers must pardon us for taking up their attention with a subject, the importance of which none but fools or worse than fools, can underrate. The facts of the case must be forced upon people before public opinion can compel a remedy.

The most practical mode of estimating the extent of the evil is by reckoning it at a money value. Much to their discredit, several of the London newspapers insert the advertisements of such people as Dr. Henery, and availing themselves of the late outcry against this traffic, they have—done what? Answered the public exclamation of disgust against their pandering to evil? Have they suppressed these dirty advertisements? By no means; “they have in some instances increased their charges for this class of advertisements some three or four hundred per cent.” Of course, as we shall be told, they have done this with a view to suppressing them; that is, by making sin costly, they affect to discountenance it. But the quacks advertise just as freely as before, and the only result is, that the proprietors of a single journal “pocket, according to the new rate of charges, and the number of advertisements now being daily inserted, between three and four thousand pounds per annum.” To be sure these newspapers compound for the sin by writing sensational leaders against quacks, which is rather unfair upon these profitable customers. Sambo himself preferred floggee to preachee, and it is rather hard upon the vendors of “sealed books” to be both fleeced and preached at by a London newspaper. “Detector” has been at the trouble of noting the number of advertisements inserted by one firm of

quacks alone in one London newspaper, "which has converted the recent outcry into a source of profit," and he finds that in six consecutive days these fellows have inserted, and of course paid for, forty-six advertisements. That is to say, according to the new scale of *prohibitory* charges, "one newspaper pockets from one firm of a family of quacks £2,890 per annum." Let anybody, taking this basis of calculation multiply the payments made by one firm to one newspaper and the conclusion is inevitable that a single London newspaper may easily, or perhaps in this instance must, make at least £10,000 a year by obscene advertisements. Further, we find that one firm of these quacks—comprising, according to "Detector," three establishments—must also spend as much as £10,000 a year, and most likely very much more, on the advertisements which they insert, not in our London papers alone, but in many others—metropolitan, provincial, and colonial. Add to this the cost of paper, and of printing their filthy books and handbills, and distributing them by post gratuitously—"Colonel ——— informed me that all the officers at Aldershot were annoyed by this class of books being sent to them"—and we shall get an approximate estimate of the profits of a trade which can afford to spend so much in advertising. Any ordinary tradesman would reckon his annual trade profits at least twice his expenditure on advertising. We can therefore show, by "Detector's" help, that the cost of advertisements, and gratuitous copies of their publications and posting-bills, to one of these tradesmen in vice and extortion, must reach to £12,000 or £15,000 a year, from which it follows that the profits of one of these establishments must approach to £30,000 a year. Compare this return with the very best medical practice in London, and verily we are a wise and understanding people to allow this sort of thing to go on. But we are not left to approximate calculations or to conjectural, though most probable, statistics as to the profits of these traders on the follies of the credulous. Here are some of "Detector's" facts. At p. 35 we find the case of a young man who had nothing on

earth the matter with him, but had frightened himself to death by reading one of these pernicious books, paying in a gross sum, £220, and giving acceptances for £280 more. Again: another victim, after paying eighty guineas, was informed that his case required for its cure '*a preparation of gold*' so enormously expensive, that it could not be prepared unless the patient paid down a thousand guineas." At p. 76 we find a still more remarkable and nefarious transaction, which was in part defeated by the interposition of the late Sir B. Brodie. A young gentleman "not labouring under any disease requiring medical treatment," consulted one of these London quacks, "his attention being attracted by an advertisement in one of the London newspapers, of a book called '*On the Philosophy of Marriage*.' A cure was undertaken for £300, and the dupe gave stamped securities for the payment of the £300 in three years. Subsequently other securities were given for the payment of £500 more; and when these bills came to maturity, and the acceptor was unable to meet them, the poor wretched young man agreed to pay £1,250 by instalments of £100 a year for the first five years, and £150 a year for the next five years. Besides incurring liability for this enormous sum, the victim, "who, when he consulted the quack, was not really ill," actually paid as much as £765 in the way of instalments and renewal of bills, and was only released from his engagements for the £1,250 additional by a suit in Chancery, in the progress of which Sir B. Brodie made an affidavit to the facts of the case. By this application to Chancery the quack was compelled to compromise the matter by repaying £400 out of the £765 which he had received, and by giving up all claims to the further sum of £1,250. The result is, that in an unsuccessful instance of extortion, and, moreover, in one of those rarest of cases in which the patient applied, and successfully, to the law to extricate him from the complicated meshes in which he had involved himself, the quack contrived to get £365 for a single "case." "Detector's" next instance—we forbear from the tedious and monstrous details—is "another case in which

proceedings in Chancery were instituted against a notorious firm for the recovery of £600 in money, and bills for £2,000 obtained by them from a credulous young man," and from Yorkshire too. This case bears date 1850, and "Detector" says: "I have now before me an official copy of the bill in Chancery," and it is some satisfaction to know that the eminent practitioners proceeded against were compelled to disgorge every farthing of the fees and securities obtained from the young gentleman from the country. From the known, we may in this instance with tolerable certainty infer the unknown; and with these facts before us, we think it certain that the estimated profit of £30,000 a year for a single firm is probably much within the mark.

"Detector," however, does not content himself with this indirect proof of the extent of the evil occasioned by advertising quacks. After remarking that "reptiles cannot be destroyed by sprinkling them with rose-water," and that "mere initial denunciations, and mysterious hesitating references to so-called Dr. This or That, residing near such a street or square," will not be enough, "Detector" hunts his quacks down singly, and denounces, by name and residence, in alphabetical order, all the gentlemen whose advertisements are to be seen in the newspaper. He gives the names, and *aliases*, and occasionally the biographies, of no less than thirteen of these advertising practitioners in London alone, whose names and qualifications are not to be found in the authorised Medical List, or on the registers of the Medical Council. He shows, as Henery's case indeed showed, how the quacks practise under false or assumed names; or how the same fellow reproduces himself as Messrs. H. of one place, and Dr. H. P. of another; or how, like Cerberus, three single gentlemen are rolled into one, and preside under various *aliases* over various Institutes and Colleges in various parts of the town. We are not disposed to follow "Detector's" example, or to extract his minute and careful revelations, partly because we do not choose to furnish the quacks with an advertisement, and partly because those curious in such matters may read the

names of these fellows in the advertising pages of too many of our contemporaries, and partly because "Detector's" narrative is too good to be abridged, and ought to be, as we believe that it is, largely circulated, which is no less than it deserves, both for its fearless tone, and for the care and research which have been bestowed on its compilation.

We ought to state that extortion of money is not the worst evil for which the quacks are responsible. Since Henery's conviction, we find the records of two suicides, which are proved to have originated in morbid fears occasioned by the publications which "Detector" denounces. One was the case of Corporal Ashford, of the Coldstream Guards, at the inquest on whose body, held March 17th, it was found that he had purchased the "Warning Voice" and after consulting its authors, or circulators, blew his brains out. The other was that of a man named Miles, a foreman on some works at Gravesend, who destroyed himself in January. On the inquest it was proved that he had been in the habit of reading works on "Secret Diseases," and in their verdict the foreman intimated that the jury "considered deceased's insanity to have been brought about by the perusal of certain pamphlets issued by, and letters received from, Dr. De Roos, of Tavistock Square.

But it is superfluous to enlarge on the extent of the evil. Thanks to too many of our public instructors, it meets us in the daily newspapers. It flaunts itself in the most crowded thoroughfares in the shape of Priapeian Museums and Public Lectures, which are only advertisements for the private establishments of the quacks who are their proprietors. It thrusts bills and invitations into the hands of passengers in the public streets. It proclaims itself on every wall and lamp-post. It ruins foolish young men by the thousand—ruins them in body, soul, and purse; it destroys the peace of families; and it inflicts tortures worse than death—rack-ing fears, mental anxiety, ghastly horrors of unknown and coming evils, poverty, insanity, suicide. And yet nothing is done, while the suppression of the evil is easy enough. We

do not mean to say that the quacks can be prosecuted for selling or circulating obscene books under Lord Campbell's Act. If their abominable wares were simply obscene, they would be much less injurious than they are. This is not their chief vice. What they do is to terrify those who read them with a frightful catalogue of imaginary maladies, ending in the most direful consequences, illustrated by terrific pictures and plates of every conceivable and inconceivable result, the sole escape from which is by taking the invaluable specific of Dr. A., or B., C., and Co., who always advertise themselves as regular practitioners. This is the point at which the law ought to interfere, and at which the public is justified in demanding protection from the law. If as we suppose must be the case, the present Medical Registration Act cannot punish or prevent these imposters, let its powers be enlarged. It is the veriest idleness and pusillanimity of legislation which declines to interfere in such a case out of pretended regard for the freedom of the subject. This wretched pretext has been rather overworked. And surely, if the public safety requires Parliament to interfere in the matter of selling poisons over the counter of an open shop, these secret marts of poison—physical, mental, and moral poison—ought to be dealt with. A single successful prosecution of a quack—not by one of his victims, but by authority—would extirpate the whole gang. And public opinion is nearly ripe for demanding, if it does not already loudly require, the interference of official authority.

[From the MEDICAL CIRCULAR, March 27, 1865.]

FROM the concluding remarks of "Detector's last letter, I presume that clever elucidator of quack practices has taken leave of you, at least for the present. Every member of the profession, every well-wisher of his species, is under an obligation to the writer, who has so manfully laid bare the villany of the quack fraternity. He has announced his intention to reprint his letters; could philanthropy be better

exercised than by the dissemination of thousands and thousands of copies over the length and breadth of the land? I hear of these quacks printing a hundred thousand copies of their filthy pamphlets at a time; why should not "Detector" be helped to do the same? Let the reprint be published at as low a price as the paper and print will admit of, and let me hope that he will find a Howard, or a Bond Cabbel, or other philanthropist, who will give it a circulation at least equal to the filthy books it so well exposes. Every young man in the kingdom, from the age of sixteen and upwards, should read this reprint, and every father and every guardian of youth should take care they do, and then the obscene quacks may close their establishments, for their occupation would be gone.

QUACKS AND THEIR CRIMES.

[*From the WEEKLY DISPATCH, April 9, 1865.*]

Good service has been done to society by the "Medical Circular," in publishing a series of letters entitled "Revelations of Quacks and Quackery," which is republished in the form of a pamphlet. Among the "Notices to Correspondents" in the "Dispatch," the reader will occasionally have noticed, in answer to inquiries touching certain pretenders to the character of medical practitioners, a caution, warning the querist to avoid them, and designating them as quacks. This is the most valuable information concerning those rascals that the readers of the "Dispatch" will meet with in any department of this journal. The exposure of individual impostors, where the evidence of their dealings was undoubted, everyone knows to have been constant and unsparing. But the advertising columns of many of our contemporaries, especially the country newspapers, are defiled, in a measure as large as it is disgusting, with the advertisements which the proprietors of those journals allow the quacks to insert in them; to set there, as traps to catch prey under the

name of patients. We all know that "fools are the game that knaves pursue;" and the victims captured by means of quack advertisements are not generally among the wiser portion of the community. Many of them, however, lie open to be allured into the quack's net, not by mere congenial and absolute folly, but only either through the inexperience of youth and want of knowing the world, or a natural deficiency in the particular faculty of deciphering characteristic expression. There are some who fail to recognise a quack advertisement when it meets their eye, from a defect of perception similar to that which incapacitates certain persons from distinguishing a sporting gent, or any other man, whether conversant with horses and exhaling the stable mind, or denoted to be whatever else he is in particular, by outward and visible signs. Such persons, however, might be preserved from becoming the dupes of pseudo-medical swindlers by the plain information respecting them that could be imparted by a competent "guide, philosopher, and friend;" and such an one they will find in "Detector," the signature under which the correspondent of the "Medical Circular," whose letters are in question, wrote and re-issues, his "Revelations of Quacks and Quackery.'

These "Revelations" do indeed constitute a full, true, and particular apocalypse of the infamous practices of the scoundrels who are exposed in them, and have, besides, the special merit of giving the names of all these advertising impostors and rogues. "Detector," indeed, not only gives the names of the quacks, but also of their aliases; for like other irregular practitioners, they mostly carry on their fraudulent operations under assumed names. One notable particular in his "Revelations" is the fact that they act in gangs, euphemistically calling themselves firms, in many of which the partners, or accomplices, are all the same persons—indeed, members of one family—driving their abominable trade in separate places, at distinct establishments differently denominated. Thus it often happens that, when a simpleton has been a sufficiently great one to consult Quack No. 1 and

Co., and after having been plundered by them for a long time without relief, goes to consult Quack No 2 and Co., and is shown into their consulting room—presently in walks, as Mr. No. 2, the very same quack that had, as Mr. No. 1, already fleeced him !

The amount of plunder which the obscene quacks, shown up by "Detector," are extorting from the credulity and nervousness of the public may be computed from the figures given by him of the money spent by them in advertisements. "The reader," he says, "may judge of the extent and success with which those pretending physicians and surgeons carry on their frauds, when he learns that the annual cost of the advertisements inserted by the principal quacks in the metropolis and provinces may be estimated, without taking into account the cost of the colonial advertisements, collectively at about 50,000*l*." To this outlay add other incidental expenses of their villanous business, the cost of the paper and printing of their foul books, handbills, and posters, and of their fine houses and establishments, ostentatious equipages, and enormous luxury. Take also into consideration the large fortunes some of them are known to have made. It is evident from this data that the gross "annual amount derived from their nefarious trade" must bear some not inferior proportion to the grossness of the extortion in which that noisome trade consists. The profits of their "firms" have been estimated at about 30,000*l*. a year. The advertising expenses of the quacks have of late been considerably augmented by a shrewd expedient, masked under an affectation of virtue, on the part of certain newspaper proprietors who have responded to the appeals addressed to them by the decent and scrupulous portion of the Press, inviting them to exclude the beastly puffs of those blackguards from their columns, by raising their scale of charges for such announcements, under the pretence of a prohibitory tariff, some ree or four hundred per cent. According to "Detector," one of these accessaries of obscene extortioners is making between three or four thousand pounds per annum by the lies and

filth with which, on this system of sham discouragement, he suffers them to pollute his newspaper.

The sums out of which the 'gangs of quacks contrive to cheat the weak young men who have recourse to them in some cases amount to upwards of a thousand pounds. Quacks have been known to take as much as 500*l.* in a single fee : 220*l.* down on the nail, and a bill at a short date for the balance, 280*l.* This plunder they derive from their victims by working on their fears, excited in the first instance by the prodigious falsehoods asserted in the loathsome books of cases advertised under the title of scientific treatises. They aggravate these terrors by the reiterated lies which they tell those unfortunate bodies, aided by the exhibition of plates and wax models representing the frightful ravages of disease, from which they assure them that the only possible escape rests in submission to the treatment which they alone are able to prescribe. It is a common dodge with them to represent this treatment itself as tedious and terrible, something only less dreadful than the uncontrolled disease ; and then, when the sufferer, real or imaginary (in general imaginary), anxiously inquires if there is not some easier way to a cure, to inform him that there is, but that it is of such a nature as to be enormously expensive. The monstrousness of their impudence and the gullibility they practise on, is such, that one lie through which they are in the habit of robbing their patients of hundreds and thousands of pounds, consists in accounting for the pretended expensiveness of the treatment necessary for the milder method of cure by the assertion that it requires "a preparation of gold." In one case cited by "Detector," the quack said that this remedy was so dear that he could not prepare it unless the patient paid him a thousand pounds down. The further means of extortion employed by the quacks in question consist in threats of violation of professional confidence by publication of details of the patient's disorder. Happily, for once, in the case of the notorious "Dr. Henery," this device has resulted in imprisonment and hard labour. In other cases wherein the

pressure of the law has been brought to bear upon him, the quack has been obliged to disgorge the greater part of his booty. "Detector" mentions one case in which, by the help of the late Sir Benjamin Brodie, he was enabled to get a quack in Chancery, and to make him forego his hold on securities to the sum of 1,250*l.*, which he had obtained from his dupe, after having robbed him of 760*l.*, minus 409*l.*, which, by compromise, the quack agreed to refund. In another instance "Detector" succeeded in compelling a notorious firm to refund altogether 600*l.* in money and 2,000*l.* in bills. So much for some idea of the robbery perpetrated by the obscene quacks. "Detector," moreover, cites two recent cases of suicide occasioned by their false and filthy publications.

The present Medical Registration Act is insufficient to abate the quack nuisance. Additional legislation is required. Under the licensing system it is quite possible for magistrates to suppress a respectable public-house. Would it be impossible to provide by the State, at least as effectually, for suppression of the establishments of infamous quacks? Surely the vested interests of the medical profession are entitled to as much consideration as those of publicans, especially in a matter which, no less at any rate than the public-house concerns the public.

"DETECTOR'S" BROADSIDE ON QUACKS AND QUACKERY.

[*From the SUN, April 12, 1865.*]

MR. COURTENAY'S bold, dashing, slashing, pamphlet, entitled "Revelations of Quacks and Quackery"—being a reprint of a remarkable series of letters published by him originally under the pseudonym of "Detector," week after week, in the columns of the "Medical Circular," and here republished in a formidable *brochure* of seventy-two pages octavo—Mr. Courtenay's daring, pitiless, and uncompro-

missing pamphlet is really and truly, we should say, a capital substitute for the pillory ! There are certain offences against public decency and public morality in regard to which we are sometimes almost disposed to regret the abolition of the punishment of the pillory. And it is against one of these—it is against one of the very worst of these—that “Detector,” that is to say, Mr. Courtenay, has opened up his terrific, ripping, tearing, annihilating broadside ! With a bold, and, we would almost say, self-sacrificing devotion to the interest of the public—disdaining to think of the pitch and filth he is constrained to handle in doing it—“Detector,” resolutely buckling to the unenviable task he has set himself, resolutely seizes, one after another, upon a whole set of these quacks, fastening them, one after another, as he seizes them in the pillory of his pamphlet. It is for all the world like the actual realisation of Tenniel’s ruthless cartoon in a back number of “Punch,” wherein, it may be remembered, one of the Dr. Henry genus was being pelted with some of his own medical abominations ! “Detector’s” labours, in another way, might be regarded as having been undertaken in imitation of one of the most famous of the labours of Hercules—namely, that of cleaning out the stable of Augeas. So far as the feather-end of a single pen could do it, “Detector” has cleared out *his* stable, that stable the doors of which he has not hesitated to fling wide open to the public at large ! And he has “gone in” at this effort of his towards making a clean sweep of it so resolutely, and with a will, as the sailors have it, that his (“Detector’s”) grey goose-quill, we will hope, may prove for the quacks and for quackery like a very twig out of the besom of destruction.

GUIDE TO THE QUACKS OF LONDON.

[From PUNCH, April 12, 1865.]

A SERIES of papers relative to quacks, which appeared in the “Medical Circular,” with the signature of “Detector,”

has been republished in the form of a short pamphlet. The reader of "Punch" should read this pamphlet also. He has often read in the pages of "Punch" of certain quacks, fraudulent and noisome, who obtain money by false pretences, and more money by menace and extortion, from green young men. For their names, which "Punch" would not advertise, he has referred his readers to the low corners of the advertising columns of low newspapers, amongst which too many of "Mr. Punch's" contemporaries, especially in the country, may still be enumerated. But now he begs to publish the information that a nominal list of these miscreants with copies of their puffs, and other particulars concerning them, needful to be known, will be found in the pamphlet above referred to, which is entitled "Revelations of Quacks and Quackery," and is to be had at the "Medical Circular" Office, 20 King William Street, Strand, W.C.

The vile practices, the monstrous impudence, the cruel rapacity, and the enormous gains of the obscene tribe of quacks, the mischief they do, the ruin they work, even to the causation of suicide, are fully set forth in "Revelations of Quacks and Quackery". And mark especially that, as aforesaid, the names of the quacks are published. The pamphlet in question thus constitutes a regular Quack Directory, by consulting which every young man may know where he may go if he wishes to get plundered and destroyed.

The "Medical Circular" has a great advantage over a non-medical journal in respect to the exposure of quacks. An ordinary periodical could not call a quack a quack by name, to say nothing of denouncing him as an extortioner and a scoundrel, without incurring the danger of an action for libel. No difficulty would be experienced by the most notorious quack or gang of quacks, in finding among the members of an honourable profession an attorney who would take their instructions, and a barrister who would plead their cause. A pedantic construction of the law of libel on the part of British judges, and stupidity on that of British jurymen, are not so rare but that such a fellow as the convict "Dr. Henery"

would, as plaintiff in a libel case, obtain, in compensation of his assailed honour and impugned integrity, vindictive damages. But no prospect of damages will tempt any quack to give a periodical almost restricted to the Medical Profession the much more damaging effect to himself of the general publicity which it would gain by a prosecution.

Buy, therefore, reader, by all means, buy "Revelations of Quacks and Quackery." Its contents will astonish and amuse you, while they invoke your indignation and disgust. Of course you do not want it on account of its warnings for your own sake, but you doubtless do for the sake of the many simpletons with whom you must be acquainted if your acquaintance is large. "Who are the quacks that 'Punch' means?" Consider what it is to be able to answer this question of the young and inexperienced, and, for charity's sake, if for no other, go and provide yourself with "Revelations of Quacks and Quackery," by "Detector."

[From the UNITED SERVICE GAZETTE, May 27, 1865.]

THE letters of "Detector" have already attracted no small share of public attention in the class journal to which they were sent, but the writer acts wisely in collecting them in a pamphlet, so as to remain a permanent exposure of quacks and quackery. We do not know which most to admire in these letters, the effrontery of the exposed quacks, or the gullibility of their victims, both of which are dealt with by Dr. Courtenay with a free and fearless hand. Surely the criminal law could be made to reach such scoundrels. Men are sentenced every day to penal servitude for life for extorting money by the threat of certain accusations, and why should not equally severe measures be dealt out to fellows who obtain their large fees by a precisely similar process? In both cases the threat of exposure is the screw which acts so effectively on the victim.

[From the SOCIAL SCIENCE REVIEW, June 1, 1865.]

A CYNIC has remarked that the *genus homo* might conveniently be divided into two main classes—rogues and fools—and there would be little difficulty in assigning a ready place to ninety-nine of every hundred persons classified.

Without fully accepting this doctrine, there can be no doubt that the history of the advertising quacks, particularly of London, reveals an amount of ignorance and credulity displayed by a large section of the public—composed for the most part, too, of those claiming to be considered educated and generally well informed—that would hardly be believed, were the truth not so painfully apparent. These “Revelations” recently appeared in the “Medical Circular,” as a series of letters, under the *nom de plume* of “Detector,” and created so great an interest that the author has been induced to republish them in a pamphlet form. They supply the names, *aliases*, and the history of the more notorious of the gang of thieves; explain the mode of deception by which they entrap and defraud their victims, and show the enormous profits that are annually realised by their nefarious trade. We have no space to give extracts; nor is it necessary, as the work is published at a price which places it within reach of all interested in the subject of its contents—a large class, as the particulars prove. We need only remark that the author deals with the impostors with a firm hand. “Reptiles cannot be destroyed by sprinkling them with rose-water,”—he observes, and certainly he does not let a mawkish sentimentality interpose to turn him from his purpose. The time has come when it is absolutely necessary to speak out. Public decency is daily outraged by the filthy handbills that are thrust into the hands of the pedestrian in most of the great thoroughfares; and “Medical Halls” and “Museums,” eminently calculated to deceive the unwary youth, are springing up in various parts of the metropolis, and budding and sprouting with the proverbial luxuriance of ill weeds. Something, we repeat, must be done to put a stop to this; and if Government will not interfere in the matter, the Press, must be looked to to

rid the country of the evil. We can, to borrow the language of the quacks, "truly recommend parents, guardians, and patients to peruse the valuable remarks that are contained in these 'Revelations,' " touching the ignorance, imposition, and credulity of which they treat.

[From PUBLIC OPINION, June 10, 1865.]

THESE revelations are made in a series of letters, written by F. B. Courtenay, Member of the Royal College of Surgeons of England, to the "Medical Circular." While the revelations were appearing they excited considerable attention, and now they are issued in a pamphlet they ought to be read all over the land. "Detector" has exposed with merciless severity the doings of the quack firms in London; he has shown how they entrap their credulous victims and basely plunder them. Among the parties named by "Detector" as quacks are Hammond, Perry & Co. Watson, Bright & Co., Curtis, *alias* La'Mert, Walter de Roos, Harvey & Co., W. Hill, Esq., H. James, Esq., Dr. Kahn, *alias* Sexton, D'Lalor, Marston, Smith, and Thomas. A pretty good phalanx, to be sure of them, like professionals on whom the police have an eye, enjoying the privileges and advantages of *aliases*. Some of the apostles of medicine, feeling that their letters and pamphlets are not sufficiently potent to rouse the suffering public to a sense of the seriousness of the physical maladies, having opened museums, where models serve to illustrate the ravages of various ailments. This is philanthropic and considerate, and very likely has the effect of increasing the consulting fees, or, in other words, facilitating secret robberies. Our surprise is that a set of unskilled charlatans, unskilled in medicine but adepts in thieving, should be permitted by the law to flourish so rankly and so glaringly. When burglars, pickpockets, and garotters are detected and convicted, they undergo some salutary correction and punishment; why should not the quacks who are viler and more ignominious miscreants than garotters and other dangerous

thieves, when caught in swindling their terrified dupes, be subjected to the same sort of exhilarating treatment! If we punish one set of lawless scoundrels who rob houses and beat men in the street, why should we leave unchastised an illiterate gang of impudent and crafty vagabonds who, under a medical pretext, pick the pockets of the timid and the unwary? The evil these quacks do is both sad and serious; they ruin often the health of their victims, deprive them of sanity, and ruin them in purse. The healing art is a noble one; duly qualified men, when really interested in their profession and skilful, are public benefactors. It is a disgrace, then, that their practice, which compels them to be educated, should be usurped by unlearned and mendacious quacks, whose heartlessness and cool dishonesty are unparalleled by any other set of robbers. We hope the medical profession, who, whatever may be their faults and quarrels, will take some step that shall result in a law capable of routing the medical vermin from their strongholds, and be the means of guarding the nervous and the simple from being terrified and shamefully defrauded.

"Detector" has done his work well; he has nasty materials to deal with, but he has made out a case so strong against the quacks that it must have beneficial results. We advise the public to purchase these "Revelations," and see how the disgusting tribe of sham doctors are pilloried and their doings related. London, and indeed many large provincial towns, ought to be speedily purified from the presence of men who are loathsome and inexpressibly despicable, and who have too long evaded a course of justice dealt out to their brethren of burglarious propensities. We would every quack, on being convicted of fraud or as practising as a doctor, were treated to a good scourging with the cat-o'-nine-tails, and then consigned to a long term of penal servitude.

We could scarcely credit the stories "Detector" has here made public if his veracity and respectability were not beyond doubt. With such astounding facts before us, and which have been extensively circulated, it would be a great crime

towards the public to neglect trying to extinguish the unclean and ungodly vampires around us, so as to protect youth especially from their vile and vulgar influence. The press can do much in the reform needed by refusing to insert abominable advertisements. We regret there are quacks in the press whose virtues are hypocrisies, and whose love for the public welfare is a transparent sham. The hollow morality of the press quacks is, to our infinite disgust, paraded before us ; the public are daily gulled by prints that pretend to care for their safety in slangy leaders denunciatory of all sorts of impositions, but that find it a too painful and profitless task to refuse publicity to quack advertisements. When the press shall universally reject quacks' announcements, quackery will decline and the public be benefited. Our own columns have never been sullied and dirtied by indecent medical announcements ; and we rejoice that a man so clever and fearless as "Detector" has laid bare for the good of society all over England the workings of a band of bastard medical practitioners, whose undisguised existence in our midst is a deep stain on our honour, thoroughly inexcusable ; for the execrable knaves and villains we are describing, with their lewd and brazen manifestoes, corrupt and pollute alike the minds and morals of a large class of people who have not the courage to disbelieve their monstrous exaggerations, or the good sense to despise their revolting indecencies.

[From the ANTI-TEAPOT REVIEW, May, 1865.]

It must not be supposed that the author of these startling "Revelations" is a Scotchman, who does not see much difference between the Apocrypha and the Apocalypse, or a disciple of Dr. Cumming, a divine to whom the exiled Saint had been such a signal benefactor. Mr. Courtenay does not class Parr or Du Barry amongst the scoundrels who are held up, by name and address, to universal execration : and he is quite right. It would be very hard to disabuse the minds of a believing public (afflicted with toothache and neuralgia)

that all the nice professions one sees in advertisements, as unfailing remedies, &c., are, after all, but part and parcel of an organised system of quackery and deception.

The author of "Quacks and Quackery" is, every inch of him, a thorough, honest, English gentleman. He stands boldly forward, and denounces in no measured terms the vile impostures which are daily fawned upon the indiscreet part of the British population. He gives the names and addresses of all those individuals who have for years made a living out of the fears and vices of a considerable proportion of the community; and the best proof which can be given of the author's truth and soberness is, that not one of the individuals placed by him in the company of medical swindlers has dared to proceed against him for libel. The silence of pure innocence cannot persuade us that Mr. Courtenay has maligned or libelled a class of swindlers, who have nothing to prove contrary to the facts alleged against them; for pure innocence does not exist amongst a class of sham doctors whose sole aim is to advertise largely, and receive large fees, amounting in some cases to between two and three hundred pounds, for prescriptions and remedies which are utter shams.

Let us call all Anti-Teapots to the rescue. Let the notorious Dr. Henery stand forward as an example and "caution." Above all, let those papers which contain the contaminating advertisements of quacks, such as Mr. Courtenay describes, be for ever "cut," and eschewed by all decent people. It is a notorious fact that many newspaper proprietors, availing themselves of the late outcry against quacks and quack advertisements, have increased their charges for this sort of advertisements *some three or four hundred per cent.* Thus, while the probably ill-paid, high-minded, and talented journalist is firmly denouncing the enormity of quackery, his master is quietly pocketing, according to the new rate of charges and the number of advertisements daily inserted, between three and four thousand pounds per annum! As Mr. Courtenay does not mention those newspapers by name we shall make it a point of duty to hold them up to the public in future

numbers of the "Anti-Teapot Review," until we see the last of those filthy advertisements which have too long disgraced the columns of some daily papers. We have our eye on several (London and provincial) at the present moment ; and if newspaper proprietors continue to do the dirty work of quacks, they shall receive no mercy at our hands. It is a scandal and disgrace to Englishmen that public journalists, or in other words *custodes morum*, should be allowed to assist in disseminating the moral poison contained in disgusting advertisements. Heads of families, who need not of necessity be "heads of houses," can surely prevent newspapers which thus offend from entering the sacred precincts of their domestic circles. Quack advertisements, of which Mr. Courtenay gives us many specimens, are simply traps set by a cowardly class of miscreants to catch the young and credulous, suffering in reality or in imagination. A regular system of intimidation and extortion is pursued towards their dupes by the quacks, in order to obtain the means to meet their gigantic expenditure, the annual cost of advertisements alone being collectively 50,000*l.* per annum.

Mr. Courtenay gives us a whole string of facts and details, and says that the cure for the crying evil of quackery may be described in the words, *publicity and non-publicity*. "On the one hand let us have a widespread publicity given to the evil practices of quacks ; on the other, let us insist on the non-publicity by the press of their advertisements." We regret that our space is (still) too limited to enable us to do justice to Mr. Courtenay's book,—it ought to be read by all young men in England, and translations for the use of unsuspecting foreigners would be invaluable ; the cost is only eighteenpence. Will no one venture to show up the most notorious London money-lenders, and some of the "scholastic" and other "agents" who accept fees for booking graduates and others to appointments which are never made ?

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